

Appendix F.4: Vineland

Vineland: OMB Coversheet

Form Approved

OMB NO. _____

Exp. Date _____

Public Reporting Burden Statement

Public reporting burden of this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-XXXX)

About the Individual:

Name: _____

Sex: _____ ID: _____ Grade (if applicable): _____

Highest Grade Completed (if applicable): _____

School or Other Facility (if applicable): _____

Present Classification or Diagnosis: _____

Language Spoken at Home: _____

Age: Year Month Day Age Used for Starting Points: _____

Interview Date: _____ Type (circle one): Chronological

Birth Date: _____ Mental

Chronological Age: _____ Social

Data from Other Tests: Intelligence Achievement Adaptive Behavior Other

Reason for the Interview: _____

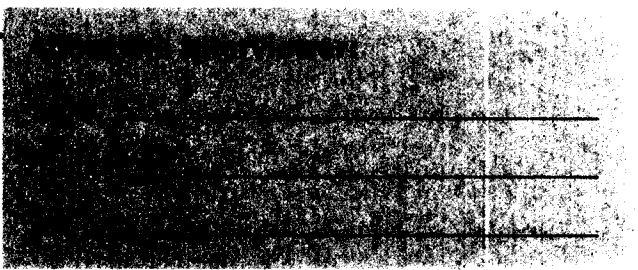
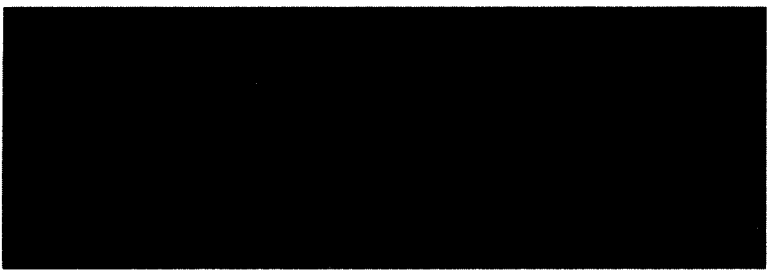
Vineland-II

Adaptive Behavior Scales

**Record
Booklet**

Survey Interview Form

Sara S. Sparrow, Domenic V. Cicchetti, and David A. Balla
A revision of the *Vineland Social Maturity Scale* by Edgar A. Doll



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Product Number: 31012

About the Interview:

Respondent's Estimate of the Individual's Functioning: _____

Language Used in the Interview: _____

Special Characteristics of the Individual: _____

Estimate of the Rapport Established with the Respondent: _____

Estimate of the Respondent's Accuracy: _____

General Observations: _____

