

Questionnaire

Thank you for agreeing to participate in the National Children's Study (NCS) and completing the Infant/Toddler Sensory Profile™. This questionnaire will take about 15 minutes to complete. It includes questions about how children react to physical sensations, such as touch, sounds, tastes, smells, movement. If you have more than one child in the NCS, please fill out a separate questionnaire for each child. You may use a pencil or pen to record your answers.

Your answers are important to us. We will keep everything that you tell us confidential.

Listed below are several points that you may find helpful in completing the questionnaire:

- Write your name, your child's name, your relationship to child, and today's date in the appropriate sections where indicated on the questionnaire.
- The Infant/Toddler Sensory Profile™ consists of a list of ways that children react in different areas such as hearing, vision, and touch.
- Please refer to the top of the first page of the questionnaire for a description of how to answer: Almost Always, Frequently, Occasionally, Seldom, or Almost Never.
- Read each item carefully and mark the answer (Almost Always, Frequently, Occasionally, Seldom, or Almost Never) that best describes how often your child shows the behavior.
- Please do not skip any questions and please mark only one answer for each question.
- If you change your mind about an answer, please strike out your original answer and then select your new answer.
- Before returning the questionnaire to the Regional Operations Center (ROC), please review it for skipped answers or more than one answer for a question.
- Please follow the instructions on the next page for returning this questionnaire to the ROC.

If you have any questions, please call the local contact number located on the next page.

Thank you for taking the time to complete this questionnaire!

For Office Use Only:
Instructions for returning the questionnaire to the Regional Operations Center (ROC):
{Local instructions inserted by ROC: Provide the parent/caregiver with ROC-specific instructions for returning the questionnaire to the ROC here.}

Insert ROC contact information label here.	