

**VOCABULARY SELECTION QUESTIONNAIRE  
FOR OLDER STUDENTS WHO USE  
AUGMENTATIVE AND ALTERNATIVE COMMUNICATION**

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Student's Name:

Name of person completing form	Relationship	Date
1.		
2.		
3.		
4.		
5.		

Purpose of Form:

- To collect a SPECIFIC list of words and phrases the student needs to say in school and at home.
- To help speech therapist, teachers, and family members select the most important and meaningful vocabulary to add words to communication symbol notebooks, boards, and high-tech voice output communication aids.
- To learn which topics this student enjoys communicating about.

**PLEASE NOTE: The words you select on this form should be the words your student currently cannot say but would want or need to say.**

1. People

- a. Check the words/phrases your student would use to communicate about people generally.

<input type="checkbox"/> mother/mama/ma	<input type="checkbox"/> father/papa/dad	<input type="checkbox"/> grandmother
<input type="checkbox"/> sister	<input type="checkbox"/> brother	<input type="checkbox"/> grandfather
<input type="checkbox"/> boy	<input type="checkbox"/> girl	<input type="checkbox"/> cousin
<input type="checkbox"/> baby	<input type="checkbox"/> friend	<input type="checkbox"/>

- What specific family members would the student communicate about? (For example, sister = Nancy, mother is called Mama)

- What specific teachers and other specialists would your student communicate about? (For example, teacher = Mr. McBride, family doctor = Dr. Maria)
- What friends at school would your student communicate about?
- What neighborhood friends does the student get together with often?

## 2. Places

- Check the words/phrases your student would use to communicate about places generally.

<input type="checkbox"/> outside	<input type="checkbox"/> yard	<input type="checkbox"/> school
<input type="checkbox"/> church/ temple	<input type="checkbox"/> restaurant	<input type="checkbox"/> movie theatre
<input type="checkbox"/> playground	<input type="checkbox"/> farm	<input type="checkbox"/> stores
<input type="checkbox"/> work	<input type="checkbox"/> house	<input type="checkbox"/> apartment

- What specific stores does your student go to? (Walmart, A + P, clothes stores in mall)
- Which specific restaurants does your student go to?
- Which specific vacation places would your student want to communicate about?

## 3. Activities

- Check the words/phrases your student would use to communicate about home activities.

<input type="checkbox"/> bathing	<input type="checkbox"/> lunch	<input type="checkbox"/> dinner
<input type="checkbox"/> snack	<input type="checkbox"/> bedtime	<input type="checkbox"/> breakfast
<input type="checkbox"/> taking a rest	<input type="checkbox"/> having friends over	<input type="checkbox"/>

- Are there any specific activities that your student would want to communicate about? (For example, certain daily routines that are specific to your student—like time to shave, put on makeup, do hair)

## 4. Community Activities

- a. Check the words/phrases your student would use to communicate about community activities.

<input type="checkbox"/> ballet	<input type="checkbox"/> going to movie theatre	<input type="checkbox"/> going to mall
<input type="checkbox"/> swimming	<input type="checkbox"/> going to play basketball	<input type="checkbox"/> YMCA
<input type="checkbox"/> athletic club	<input type="checkbox"/> video arcade	<input type="checkbox"/>

- Are there any special community activities and/or social events that your student would want to communicate about? (For example, birthday party, special holidays, fireworks, special olympics?)

#### 5. School Activities

- a. Check the words/phrases your student would use to communicate about school activities.

<input type="checkbox"/> Math	<input type="checkbox"/> Science	<input type="checkbox"/> English
<input type="checkbox"/> School Store	<input type="checkbox"/> Homeroom	<input type="checkbox"/> Daily Living Skills
<input type="checkbox"/> Art/ Crafts	<input type="checkbox"/> Lunch	<input type="checkbox"/> Physical Therapy (PT)
<input type="checkbox"/> Speech/Language Therapy (ST)	<input type="checkbox"/> Occupational Therapy (OT)	<input type="checkbox"/> computer
<input type="checkbox"/>		

- Are there any specific school activities that your student would want to communicate about? (For example, after school activities, boys/girls clubs, STEP program).

#### 6. Music

- a. Check the words/phrases your student would use to communicate about music generally.

<input type="checkbox"/> radio	<input type="checkbox"/> CD player	<input type="checkbox"/> tape
<input type="checkbox"/> music	<input type="checkbox"/> rap	<input type="checkbox"/> house/ techno
<input type="checkbox"/> country	<input type="checkbox"/> rock	<input type="checkbox"/> metal

- List the names of your student's favorite musicians/artists/singers and their favorite songs.

#### 7. Personal Things

- a. Check the words/phrases your student would use to communicate about the things he/she owns.

<input type="checkbox"/> bookbag	<input type="checkbox"/> Gameboy	<input type="checkbox"/> stereo
<input type="checkbox"/> clothing	<input type="checkbox"/> books	<input type="checkbox"/> jewelry
<input type="checkbox"/> watch	<input type="checkbox"/> wheelchair	<input type="checkbox"/> board game

- Are there any things your student owns that are unique to him/her? For example, a prized watch, a favorite T-Shirt, or a special Nintendo game?

- What specific videotapes and television shows would your student communicate about?
- What specific books would your student communicate about?

#### 8. Animals/ Pets

- Check the words/phrases your student would use to communicate about animals generally.

<input type="checkbox"/> animal	<input type="checkbox"/> dog	<input type="checkbox"/> cat
<input type="checkbox"/> horse	<input type="checkbox"/> bird	<input type="checkbox"/>

- What specific family pets would your student communicate about? Include pet name and type of animal (for example, Sammy is our Golden Retriever).

#### 9. Nature

- Check the words/phrases your student would use to communicate about nature generally.

<input type="checkbox"/> yard	<input type="checkbox"/> sky	<input type="checkbox"/> sun/ moon/ stars
<input type="checkbox"/> earth	<input type="checkbox"/> grass	<input type="checkbox"/> snow
<input type="checkbox"/> wind	<input type="checkbox"/> rain	<input type="checkbox"/> Hurricane
<input type="checkbox"/> tornado	<input type="checkbox"/> bugs	<input type="checkbox"/>

- Are there any other vocabulary items that should be included about nature?

#### 10. Household Items

- Check the words/phrases your student would use to communicate about things around the house/ apartment.

<input type="checkbox"/> bathroom	<input type="checkbox"/> transfer board	<input type="checkbox"/> adapted toilet
<input type="checkbox"/> walker	<input type="checkbox"/> wheelchair	<input type="checkbox"/> bedroom/ bed
<input type="checkbox"/> chair	<input type="checkbox"/> table	<input type="checkbox"/> carpet
<input type="checkbox"/> TV/ VCR	<input type="checkbox"/> computer	<input type="checkbox"/> window
<input type="checkbox"/> plants	<input type="checkbox"/> kitchen/living room	<input type="checkbox"/> apartment number

- Are there any other vocabulary items that should be included about household items?

### 11. Positions and Equipment

- a. Check the words/phrases your student would use to communicate about positions and equipment generally.

<input type="checkbox"/> sit in wheelchair	<input type="checkbox"/> angle of chair (upright, tilted back)	<input type="checkbox"/> lay on side (L/R)
<input type="checkbox"/> sit on floor	<input type="checkbox"/> lay on bed/floor	<input type="checkbox"/> on stomach
<input type="checkbox"/> on back	<input type="checkbox"/> with wedge	<input type="checkbox"/> in stander
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- What specific positions does your student need to be in during the whole day? If helpful, please outline the positions according to the time of day. For example, sleep laying on back with pillow under head, then to sit on adapted shower chair, then to sit in wheelchair at 90 degrees, etc.

### 12. Body Parts

- a. Check the words/phrases your student would use to communicate about body parts generally.

<input type="checkbox"/> head	<input type="checkbox"/> shoulder	<input type="checkbox"/> arm
<input type="checkbox"/> hand	<input type="checkbox"/> finger	<input type="checkbox"/> wrist
<input type="checkbox"/> neck	<input type="checkbox"/> chest	<input type="checkbox"/> stomach
<input type="checkbox"/> back	<input type="checkbox"/> bottom/butt	<input type="checkbox"/> legs
<input type="checkbox"/> knees	<input type="checkbox"/> shin	<input type="checkbox"/> ankle
<input type="checkbox"/> foot	<input type="checkbox"/> toes	<input type="checkbox"/> private body parts

- Are there other words that should be included about parts of the body?

### 13. Clothing

- a. Check the words/phrases your student would use to communicate about articles of clothing.

<input type="checkbox"/> shirt	<input type="checkbox"/> pants	<input type="checkbox"/> swatshirt/ sweater
<input type="checkbox"/> pants	<input type="checkbox"/> shorts	<input type="checkbox"/> underwear
<input type="checkbox"/> jeans	<input type="checkbox"/> dress	<input type="checkbox"/> socks
<input type="checkbox"/> shoes	<input type="checkbox"/> sneakers	<input type="checkbox"/> gloves
<input type="checkbox"/> bib	<input type="checkbox"/> jacket/ coat	<input type="checkbox"/>

- What other specific words/phrases would your student use to talk about clothing? For example, Tommy jeans, Old Navy shirt, certain brands of sneakers.

## 14. Foods and Drinks

- What favorite foods would your student want to communicate about?
- What foods does your student NOT LIKE that he/she would communicate about?

## 15. Emotions/ Feelings

- a. Check the words/phrases your student would use to communicate about feelings and emotions.

<input type="checkbox"/> afraid or scared	<input type="checkbox"/> happy	<input type="checkbox"/> sad
<input type="checkbox"/> worried	<input type="checkbox"/> ashamed	<input type="checkbox"/> brave
<input type="checkbox"/> hungry	<input type="checkbox"/> thirsty	<input type="checkbox"/> tired
<input type="checkbox"/> hurt	<input type="checkbox"/> angry or mad	<input type="checkbox"/> lonely

- Are there any other words/phrases about feelings that your student would want to communicate about?

## 16. Interjections/ Teen language

- a. List the words/phrases your student would use to talk with the other students in his/her class at school. For example, “Cool!” “Yo, what’s up?”, “Whoa!”

## 17. Social/ Greetings

- a. Check the words/phrases your student would use to greet people and make polite requests.

<input type="checkbox"/> good-bye	<input type="checkbox"/> thank you or thanks	<input type="checkbox"/> good-night
<input type="checkbox"/> good morning	<input type="checkbox"/> good afternoon	<input type="checkbox"/> hello or hi
<input type="checkbox"/> please	<input type="checkbox"/>	

- Are there any other words/phrases your student would use or that his/her peers use to greet one another? For example, What’s up?

## 18. Question Words

- a. Check the words/phrases your student would use to ask questions.

<input type="checkbox"/> Who?	<input type="checkbox"/> Who’s that?	<input type="checkbox"/> What?
<input type="checkbox"/> What’s that?	<input type="checkbox"/> What if ....?	<input type="checkbox"/> Where?
<input type="checkbox"/> When?	<input type="checkbox"/> How?	<input type="checkbox"/> How come?
<input type="checkbox"/> Why?	<input type="checkbox"/> Why not?	

## 19. Pronouns

- a. Check the words/phrases your student would use to communicate about pronouns.

<input type="checkbox"/> I	<input type="checkbox"/> she	<input type="checkbox"/> it
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<input type="checkbox"/> me	<input type="checkbox"/> you	<input type="checkbox"/> he
<input type="checkbox"/> she	<input type="checkbox"/> we	<input type="checkbox"/> they
<input type="checkbox"/> mine	<input type="checkbox"/> your/yours	<input type="checkbox"/> his
<input type="checkbox"/> hers		

## 20. Verbs/ Action Words

a. Check the verbs your student would need to communicate about actions:

<input type="checkbox"/> ask	<input type="checkbox"/> hit	<input type="checkbox"/> bite
<input type="checkbox"/> come here	<input type="checkbox"/> drink	<input type="checkbox"/> close
<input type="checkbox"/> eat	<input type="checkbox"/> fall	<input type="checkbox"/> give
<input type="checkbox"/> go/goes	<input type="checkbox"/> hear	<input type="checkbox"/> help
<input type="checkbox"/> hug/kiss	<input type="checkbox"/> jump	<input type="checkbox"/> know
<input type="checkbox"/> like/ don't like	<input type="checkbox"/> lie	<input type="checkbox"/> love
<input type="checkbox"/> need	<input type="checkbox"/> open	<input type="checkbox"/> play
<input type="checkbox"/> read	<input type="checkbox"/> sit	<input type="checkbox"/> sleep
<input type="checkbox"/> stand	<input type="checkbox"/> change position	<input type="checkbox"/> stop
<input type="checkbox"/> talk	<input type="checkbox"/> take	<input type="checkbox"/> walk
<input type="checkbox"/> want	<input type="checkbox"/> do/does	<input type="checkbox"/> drive wheelchair

- Are there any other verbs that your student would want to communicate about?

## 21. Description Words

a. Check the words/phrases your student would use to describe things.

<input type="checkbox"/> big or large/ small or little	<input type="checkbox"/> medium	<input type="checkbox"/> lot/many/much
<input type="checkbox"/> good/ bad	<input type="checkbox"/> sick/ feeling well	<input type="checkbox"/> hot/ cold
<input type="checkbox"/> stinky/ smells good	<input type="checkbox"/> short/ tall	<input type="checkbox"/> clean/ dirty
<input type="checkbox"/> here/ there	<input type="checkbox"/> away	<input type="checkbox"/> nice/ bad
<input type="checkbox"/> mean	<input type="checkbox"/> pretty / fine/ okay	<input type="checkbox"/> ugly
<input type="checkbox"/> new/ old	<input type="checkbox"/> right/ wrong	<input type="checkbox"/> funny/ not funny
<input type="checkbox"/> sad	<input type="checkbox"/> same/ different	<input type="checkbox"/> done
<input type="checkbox"/> cool	<input type="checkbox"/> smart	<input type="checkbox"/> awesome/ "phat"

- Are there any other words/phrases your student would use to describe things?

## 22. Yes/ No Responses

- Place a check beside the words your student would use to communicate yes/no.

<input type="checkbox"/> yes	<input type="checkbox"/> yeah	<input type="checkbox"/> okay
<input type="checkbox"/> no	<input type="checkbox"/> uh huh	<input type="checkbox"/> nope
<input type="checkbox"/> yup	<input type="checkbox"/> maybe	<input type="checkbox"/>

