



HAVE YOU OR ANYONE ELSE NOTED THE FOLLOWING:

| Symptom                                    | Always (3) | Often (2) | Sometimes (1) | Never (0) |
|--|------------|-----------|---------------|-----------|
| Headaches                                  |            |           |               |           |
| Double Vision                              |            |           |               |           |
| Words moving/swimming on a page            |            |           |               |           |
| Eyes Tired/Sore                            |            |           |               |           |
| Dizziness/motion sickness                  |            |           |               |           |
| Frustrated with school                     |            |           |               |           |
| Bothered by light                          |            |           |               |           |
| Frequent Blinking                          |            |           |               |           |
| Closing/Covering one eye or squints        |            |           |               |           |
| Difficulty seeing distant objects          |            |           |               |           |
| Holds work close or head close to work     |            |           |               |           |
| Avoids reading or other close work         |            |           |               |           |
| Tilts head when reading                    |            |           |               |           |
| Tilts head when writing                    |            |           |               |           |
| Confuses or Reverses letters/words/numbers |            |           |               |           |
| Skips, rereads, omits words, loses place   |            |           |               |           |
| Vocalizes when reading                     |            |           |               |           |
| Reads slowly                               |            |           |               |           |
| Uses finger or marker when reading         |            |           |               |           |
| Poor reading comprehension                 |            |           |               |           |
| Comprehension decreases over time          |            |           |               |           |
| Writes/Prints poorly                       |            |           |               |           |
| Eyes tire quickly when reading             |            |           |               |           |
| Homework takes too long                    |            |           |               |           |
| Frequent erasures                          |            |           |               |           |

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|--|------------|-----------|---------------|-----------|
| Difficulty copying from board                  |            |           |               |           |
| Difficulty with memory                         |            |           |               |           |
| Remembers better what hears than sees          |            |           |               |           |
| Responds better orally than written            |            |           |               |           |
| Performing below potential                     |            |           |               |           |
| Dislikes/avoids near tasks                     |            |           |               |           |
| Short attention span/easily distracted         |            |           |               |           |
| Poor large motor coordination                  |            |           |               |           |
| Poor fine motor coordination                   |            |           |               |           |
| Avoids/dislikes Sports                         |            |           |               |           |
| Difficulty hitting a ball                      |            |           |               |           |
| Eye strain/blurry vision while reading/working |            |           |               |           |
| Often appears clumsy                           |            |           |               |           |