



# ESI Score Sheet

Child Name or #: \_\_\_\_\_ Assessment Date \_\_\_\_\_ (MM/DD/YYYY)

Scoring Method: Live Video Play Partner: Parent Other Caregiver Staff

Coder: \_\_\_\_\_ Location: Home Center Other

Primary Language of Administration: \_\_\_\_\_

Other Language(s) Spoken During Administration: \_\_\_\_\_

Notes:

Totals (from other side)						
	Child Initiated Joint Attention			Social Communication		
	Attends to Face	Non Verbal Social Gestures	Verbal Requesting	Child Initiated Physical Contact	Vocalizations	Single/Multiple Words
Adult						
Peer						
Undirected						
	Total JA Score (total from 3 key skills above) _____			Total Social Communication Score (total from 3 key skills above) _____		

### ESI Scoring

	Child Initiated Joint Attention			Social Communication		
	Attends to Face	Non Verbal Social Gestures	Verbal Requesting	Child Initiated Physical Contact	Vocalizations	Single/Multiple Word
<b>Books</b>						
Adult						
Peer						
Undirected						
<b>Blocks</b>						
Adult						
Peer						
Undirected						
<b>Bubbles</b>						
Adult						
Peer						
Undirected						
<b>Column Totals from Above</b>						
Adult						
Peer						
Undirected						
	Total JA Score: (total from 3 key skills above) _____			Total Social Communication Score (total from 3 key skills above) _____		