



Sensory Checklist

Child name: _____

DOB: _____

Please put a check or "x" next to the behaviors your child is exhibiting.

Sensory Seeking Behaviors:

- ☐ seeks out jumping, bumping, and crashing activities
- ☐ stomps feet when walking
- ☐ kicks his/her feet on floor or chair while sitting at desk/table
- ☐ bites or sucks on fingers and/or frequently cracks his/her knuckles
- ☐ loves to be tightly wrapped in many or weighted blankets, especially at bedtime
- ☐ prefers clothes (and belts, hoods, shoelaces) to be as tight as possible
- ☐ loves/seekes out "squishing" activities
- ☐ enjoys bear hugs
- ☐ excessive banging on/with toys and objects
- ☐ loves "roughhousing" and tackling/wrestling games
- ☐ frequently falls on floor intentionally
- ☐ would jump on a trampoline for hours on end
- ☐ grinds his/her teeth throughout the day
- ☐ loves pushing/pulling/dragging objects
- ☐ loves jumping off furniture or from high places
- ☐ frequently hits, bumps or pushes other children

___ chews on pens, straws, shirt sleeves etc

Hyposensitivity To Movement (Under-Responsive):

___ in constant motion, can't seem to sit still

___ craves fast, spinning, and/or intense movement experiences

___ loves being tossed in the air

___ could spin for hours and never appear to be dizzy

___ loves the fast, intense, and/or scary rides at amusement parks

___ always jumping on furniture, trampolines, spinning in a swivel chair, or getting into upside down positions

___ loves to swing as high as possible and for long periods of time

___ is a "thrill-seeker"; dangerous at times

___ always running, jumping, hopping etc. instead of walking

___ rocks body, shakes leg, or head while sitting

___ likes sudden or quick movements, such as, going over a big bump in the car or on a bike

Hyposensitivity To Touch (Under-Responsive):

___ may crave touch, needs to touch everything and everyone

___ is not aware of being touched/bumped unless done with extreme force or intensity

___ is not bothered by injuries, like cuts and bruises, and shows no distress with shots (may even say they love getting shots!)

___ may not be aware that hands or face are dirty or feel his/her nose running

___ may be self-abusive; pinching, biting, or banging his own head

___ mouths objects excessively

___ frequently hurts other children or pets while playing

___ repeatedly touches surfaces or objects that are soothing (i.e., blanket)

- ___ seeks out surfaces and textures that provide strong tactile feedback
- ___ thoroughly enjoys and seeks out messy play
- ___ craves vibrating or strong sensory input
- ___ has a preference and craving for excessively spicy, sweet, sour, or salty foods

Hyposensitivity To Oral Input (Under-Registers)

- ___ may lick, taste, or chew on inedible objects
- ___ prefers foods with intense flavor; i.e., excessively spicy, sweet, sour, or salty
- ___ excessive drooling past the teething stage
- ___ frequently chews on hair, shirt, or fingers
- ___ constantly putting objects in mouth past the toddler years
- ___ acts as if all foods taste the same
- ___ can never get enough condiments or seasonings on his/her food
- ___ loves vibrating toothbrushes and even trips to the dentist

Hyposensitivity To Smells (Under-Responsive):

- ___ has difficulty discriminating unpleasant odors
- ___ may drink or eat things that are poisonous because they do not notice the noxious smell
- ___ unable to identify smells from scratch 'n sniff stickers
- ___ does not notice odors that others usually complain about
- ___ fails to notice or ignores unpleasant odors
- ___ makes excessive use of smelling when introduced to objects, people, or places
- ___ uses smell to interact with objects