**SOS-2-EN: Score form**

**Name of child: School/grade:**

**Date of birth: Test date:**

**Name tester: Boy / Girl** \*

**Writing grade: Adequate, dubious, weak** \*

**Writing hand: Right/ Left / / alternating** \*

|  |  |  |  |
| --- | --- | --- | --- |
|  | Year  | Month  | Day  |
| Test date  |  |  |  |
| Date of birth  |  |  |  |
| Age  |  |  |  |

Line by line score the items with 0 (absent) or 1 (present) and on this basis determine score for each item (with exception of item 4). *When in doubt score 0 (absent).*

Choose either column: cursive writing (SOS-2-7i) or print (SOS-2-6i).

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Item** | **Line 1**  | **line 2**  | **line 3**  | **line 4**  | **line 5**  | **SOS-2****-7i** | **SOS-2****-6i** |
| **1** Letterform  |  |  |  |  |  |  |  |
| **2** Fluency  |  |  |  |  |  |  |  |
| **3** Transitions  |  |  |  |  |  |  |  |
| **4** Average  size: …. mm  over 5 lines  |  mm |  mm |  mm |  mm |   mm  |  |  |
| **5** Regularity  letter size |  |  |  |  |  |  |  |
| **6** Word spacing |  |  |  |  |  |  |  |
| **7** Straight line  |  |  |  |  |  |  |  |
| **Total quality score**  |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Quality**  | **Total SOS-2-7i score**  |  | **Pc** |
| **Total score SOS-2-6i** |  | **Pc** |
| **Speed**  | **Number of letters written in 5 min.**  |  | **Pc** |

**Writing problem: yes / no** \* **(\*** *Cross out what is not applicable***)**