

# Quick

# COPS

| Test                | Age of child |           |           |           |           |
|---------------------|--------------|-----------|-----------|-----------|-----------|
|                     | 4:0 –4:11    | 5:0 –5:11 | 6:0 –6:11 | 7:0 –7:11 | 8:0 –8:11 |
| Zoid's Friends      | ✓            | ✓         | ✓         |           |           |
| Rabbits             |              |           | ✓         | ✓         | ✓         |
| Toybox              |              |           |           |           | ✓         |
| Zoid's Letters      | ✓            | 3962-2560 |           | ✓         |           |
| Zoid's Letter Names |              |           |           | ✓         | ✓         |
| Races               |              | ✓         | ✓         | ✓         | ✓         |
| Rhymes              | ✓            | ✓         | ✓         |           |           |
| Wock                | ✓            | ✓         |           |           |           |
| Clown               |              |           |           |           |           |



# Specific Factors

| If the child satisfies the following criteria:            | Add an additional tick on the Quick CoPS Grid in the following cells: |
|---|---|
| a Family history of dyslexia and/or literacy difficulties | Races, Rabbits, Rhymes  |
| b Early speech and/or language problems                   | Rhymes, Wock, Races   |
| c Glue ear and/or hearing difficulties                    | Wock, Rhymes, Zoid's Letter Names                                     |
| d Poor reading skills (oral and/or silent reading)        | Rhymes, Races, Rabbits  |
| e Poor writing and/or spelling skills                     | Zoid's Letters, Zoid's Letter Names,                                  |
| f Poor maths and/or number skills                         | Toybox, Rabbits, Zoid's Letters                                       |
| g Poor listening skills                                   | Zoid's Letter Names, Wock, Races                                      |
| h Poor attention and/or concentration                     | Rabbits, Toybox, Races  |
| i Known or suspected co-ordination difficulties           | Rabbits, Clown, Zoid's Letters  |
| j Known or suspected visual difficulties                  | Clown, Rabbits, Zoid's Letters  |



Child' Name:..... Date of birth:.....

Age at time of testing: ..... years ..... months

Class:

Relevant factors used: a) b) c) d) e) f) g) h) i) j)  
(please circle)

Other information:

| TEST                | Age of child |            |            |            |            |
|---------------------|--------------|------------|------------|------------|------------|
|                     | 4:0 – 4:11   | 5:0 – 5:11 | 6:0 – 6:11 | 7:0 – 7:11 | 8:0 – 8:11 |
| Zoid's Friends      | ✓            | ✓          | ✓          |            |            |
| Rabbits             |              |            | ✓          | ✓          | ✓          |
| Toybox              |              |            |            |            | ✓          |
| Zoid's Letters      | ✓            |            |            | ✓          |            |
| Zoid's Letter Names |              |            |            | ✓          | ✓          |
| Races               |              | ✓          | ✓          | ✓          | ✓          |
| Rhymes              | ✓            | ✓          | ✓          |            |            |
| Wock                | ✓            | ✓          |            |            |            |
| Clown               |              |            |            |            |            |

*This form may be freely copied. The four tests selected for administration should be ringed in the first column.*

NOTES: .....

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