

“Look At Me!” Program

**A Fun, Free, Convenient way for YOU to
Look at how your child is developing, growing and learning!**

For Children 2 months to 5 years old

Ages & Stages is a Parent-completed Questionnaire for children aged 2 to 60 months.

Questionnaires are mailed to you when your child is 2, 4, 6, 8, 10, 12, 14, 16, 18, 20, 22, 24, 27, 30, 33, 36, 42, 48, 54, and 60 months of age. Families can generally complete the activities together with their child in as little as 10 to 20 minutes.

The Look At Me! Program helps you monitor your child’s development, guides you with activities appropriate for your child’s milestones and is a great way to help your child build on their skills. Each questionnaire has six questions in each area; Communication, Gross Motor, Fine Motor, Problem Solving and Personal-Social.

After completing the questionnaire, you can return it by mail in the enclosed envelope. If you have the technology, you may also scan the completed questionnaire and return it by email.

When we receive your questionnaire, we will review it and then send you feedback, developmental information, and activity ideas to keep you going and help your child build skills until the next questionnaire arrives!

This program is free to all families, and you can enroll any child at any time as long as they are not yet five years old. Interested? Just fill out the form below, and return it to the Look At ME! Program:

Mat-Services for Children & Adults, Inc.
“Look At Me”
5000 E. Shennum Drive
Wasilla, AK 99654
(907) 352-1200

If you have questions, please call the Look at ME! Program coordinator at 352-1229, or email your questions to gwen.teutsch@mssca.org

I have read the description of the “*Look at Me!*” program and I wish to participate. I am willing to fill out questionnaires about my child's development and send them back promptly. I understand that all information is confidential.

_____ Parent/Guardian Signature	_____ Parent/Guardian Name (Printed)		
_____ Child’s Name	____/____/____ Child’s Date of Birth	____/____/____ Due Date If Premature	Boy / Girl (Please Circle One)
_____ Child’s Name	____/____/____ Child’s Date of Birth	____/____/____ Due Date If Premature	Boy / Girl (Please Circle One)
_____ Child’s Name	____/____/____ Child’s Date of Birth	____/____/____ Due Date If Premature	Boy / Girl (Please Circle One)

Mailing Address _____

Phone Number: (907) _____ - _____

Email: _____