



# VOCABULARY CHECKLIST

Understands  
Says

## People



- |                          |                          |                |
|--------------------------|--------------------------|----------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Mummy          |
| <input type="checkbox"/> | <input type="checkbox"/> | Daddy          |
| <input type="checkbox"/> | <input type="checkbox"/> | Family member: |
| <input type="checkbox"/> | <input type="checkbox"/> | Family member: |
| <input type="checkbox"/> | <input type="checkbox"/> | Pets name:     |
| <input type="checkbox"/> | <input type="checkbox"/> | Baby           |

- |                          |                          |                |
|--------------------------|--------------------------|----------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Ball           |
| <input type="checkbox"/> | <input type="checkbox"/> | Bike           |
| <input type="checkbox"/> | <input type="checkbox"/> | Favourite Toy: |
| <input type="checkbox"/> | <input type="checkbox"/> | Favourite Toy: |
| <input type="checkbox"/> | <input type="checkbox"/> | Favourite Toy: |

- |                          |                          |             |
|--------------------------|--------------------------|-------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Car         |
| <input type="checkbox"/> | <input type="checkbox"/> | Book        |
| <input type="checkbox"/> | <input type="checkbox"/> | Duck        |
| <input type="checkbox"/> | <input type="checkbox"/> | Brick/Block |
| <input type="checkbox"/> | <input type="checkbox"/> | Cup         |
| <input type="checkbox"/> | <input type="checkbox"/> | Spoon       |
| <input type="checkbox"/> | <input type="checkbox"/> | Teddy       |

Understands  
Says

## Body Parts



- |                          |                          |       |
|--------------------------|--------------------------|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | Eyes  |
| <input type="checkbox"/> | <input type="checkbox"/> | Feet  |
| <input type="checkbox"/> | <input type="checkbox"/> | Toes  |
| <input type="checkbox"/> | <input type="checkbox"/> | Nose  |
| <input type="checkbox"/> | <input type="checkbox"/> | Tummy |
| <input type="checkbox"/> | <input type="checkbox"/> | Mouth |
| <input type="checkbox"/> | <input type="checkbox"/> | Ears  |
| <input type="checkbox"/> | <input type="checkbox"/> | Arms  |
| <input type="checkbox"/> | <input type="checkbox"/> | Legs  |

Understands  
Says

## Food and Drink



- |                          |                          |                  |
|--------------------------|--------------------------|------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Favourite Snack: |
| <input type="checkbox"/> | <input type="checkbox"/> | Drink            |
| <input type="checkbox"/> | <input type="checkbox"/> | Milk/Water/Juice |
| <input type="checkbox"/> | <input type="checkbox"/> | Biscuit          |
| <input type="checkbox"/> | <input type="checkbox"/> | Apple            |
| <input type="checkbox"/> | <input type="checkbox"/> | Food             |



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## Everyday

- |                          |                          |                |
|--------------------------|--------------------------|----------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Table          |
| <input type="checkbox"/> | <input type="checkbox"/> | Chair          |
| <input type="checkbox"/> | <input type="checkbox"/> | Tablet / Alexa |
| <input type="checkbox"/> | <input type="checkbox"/> | Phone          |
| <input type="checkbox"/> | <input type="checkbox"/> | Plate          |
| <input type="checkbox"/> | <input type="checkbox"/> | Bath           |

- |                          |                          |                 |
|--------------------------|--------------------------|-----------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Tree            |
| <input type="checkbox"/> | <input type="checkbox"/> | Flower          |
| <input type="checkbox"/> | <input type="checkbox"/> | Plane           |
| <input type="checkbox"/> | <input type="checkbox"/> | Dog             |
| <input type="checkbox"/> | <input type="checkbox"/> | Cat             |
| <input type="checkbox"/> | <input type="checkbox"/> | Bird            |
| <input type="checkbox"/> | <input type="checkbox"/> | Lorry           |
| <input type="checkbox"/> | <input type="checkbox"/> | Tractor         |
| <input type="checkbox"/> | <input type="checkbox"/> | Swing           |
| <input type="checkbox"/> | <input type="checkbox"/> | Slide           |
| <input type="checkbox"/> | <input type="checkbox"/> | Puddle / splash |
| <input type="checkbox"/> | <input type="checkbox"/> | Sand            |

Understands  
Says

## Clothes

- |                          |                          |              |
|--------------------------|--------------------------|--------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Hat          |
| <input type="checkbox"/> | <input type="checkbox"/> | Shoes/ boots |
| <input type="checkbox"/> | <input type="checkbox"/> | Socks        |
| <input type="checkbox"/> | <input type="checkbox"/> | T-shirt      |
| <input type="checkbox"/> | <input type="checkbox"/> | Trousers     |
| <input type="checkbox"/> | <input type="checkbox"/> | Vest         |
| <input type="checkbox"/> | <input type="checkbox"/> | pants        |
| <input type="checkbox"/> | <input type="checkbox"/> | Coat         |
| <input type="checkbox"/> | <input type="checkbox"/> | Dress        |

Understands  
Says

Other words  
you/ your child  
use



# VOCABULARY CHECKLIST

Understands  
Says

## Verbs

- |                          |                          |       |
|--------------------------|--------------------------|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | Eat   |
| <input type="checkbox"/> | <input type="checkbox"/> | Cook  |
| <input type="checkbox"/> | <input type="checkbox"/> | Brush |
| <input type="checkbox"/> | <input type="checkbox"/> | Clap  |
| <input type="checkbox"/> | <input type="checkbox"/> | Look  |
| <input type="checkbox"/> | <input type="checkbox"/> | Cut   |
| <input type="checkbox"/> | <input type="checkbox"/> | Drink |
| <input type="checkbox"/> | <input type="checkbox"/> | Hit   |
| <input type="checkbox"/> | <input type="checkbox"/> | Jump  |
| <input type="checkbox"/> | <input type="checkbox"/> | Kick  |
| <input type="checkbox"/> | <input type="checkbox"/> | Push  |
| <input type="checkbox"/> | <input type="checkbox"/> | Sleep |
| <input type="checkbox"/> | <input type="checkbox"/> | Run   |
| <input type="checkbox"/> | <input type="checkbox"/> | Sit   |
| <input type="checkbox"/> | <input type="checkbox"/> | Stand |
| <input type="checkbox"/> | <input type="checkbox"/> | Throw |
| <input type="checkbox"/> | <input type="checkbox"/> | Walk  |
| <input type="checkbox"/> | <input type="checkbox"/> | Wash  |
| <input type="checkbox"/> | <input type="checkbox"/> | Dance |

Understands  
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## Concepts

- |                          |                          |          |
|--------------------------|--------------------------|----------|
| <input type="checkbox"/> | <input type="checkbox"/> | Gone     |
| <input type="checkbox"/> | <input type="checkbox"/> | More     |
| <input type="checkbox"/> | <input type="checkbox"/> | In       |
| <input type="checkbox"/> | <input type="checkbox"/> | On       |
| <input type="checkbox"/> | <input type="checkbox"/> | Under    |
| <input type="checkbox"/> | <input type="checkbox"/> | Up       |
| <input type="checkbox"/> | <input type="checkbox"/> | Down     |
| <input type="checkbox"/> | <input type="checkbox"/> | Big      |
| <input type="checkbox"/> | <input type="checkbox"/> | Little   |
| <input type="checkbox"/> | <input type="checkbox"/> | Wet      |
| <input type="checkbox"/> | <input type="checkbox"/> | Dry      |
| <input type="checkbox"/> | <input type="checkbox"/> | Hot      |
| <input type="checkbox"/> | <input type="checkbox"/> | Cold     |
| <input type="checkbox"/> | <input type="checkbox"/> | Clean    |
| <input type="checkbox"/> | <input type="checkbox"/> | Dirty    |
| <input type="checkbox"/> | <input type="checkbox"/> | Blue     |
| <input type="checkbox"/> | <input type="checkbox"/> | Green    |
| <input type="checkbox"/> | <input type="checkbox"/> | Red      |
| <input type="checkbox"/> | <input type="checkbox"/> | Yes / No |