

Application for Early Entrance to Kindergarten

Department of Academic Support
Early Childhood Office

Please complete this application if you feel that your child demonstrates academic achievement, social, emotional, and physical maturity appropriate for kindergarten placement, and should be considered for early placement in kindergarten. **Your must be turning five (5) between September 2 and October 15, of the school year for which you are requesting early entrance.**

School: _____	FOR SCHOOL USE ONLY Completed application received on: Date: _____ Time: _____ Initials: _____		
	Child's Name: _____		Birthdate: ___/___/___
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Race: _____	
Address: _____			
Street	City	State	Zip Code
Parent/Guardian Name: _____		Phone: _____	
		Home	Work

Preschool Experience

What kind of early care did your child spend **most** of his/her time since last September?
(Check only one box)

- | | |
|--|--|
| <input type="checkbox"/> Head Start | <input type="checkbox"/> Prekindergarten |
| <input type="checkbox"/> Child Care Center | <input type="checkbox"/> Family child Care |
| <input type="checkbox"/> Non-Public Nursery School | <input type="checkbox"/> Kindergarten |

In addition to the experience selected above, has your child had any of the following services? Include the name of the school, center, or provider on the line. (Check as many as may apply)

- | | |
|--|--|
| <input type="checkbox"/> Head Start _____ | <input type="checkbox"/> Prekindergarten _____ |
| <input type="checkbox"/> Child Care Center _____ | <input type="checkbox"/> Family Child Care _____ |
| <input type="checkbox"/> Non-Public Nursery _____ | <input type="checkbox"/> Even Start _____ |
| <input type="checkbox"/> HIPPY _____ | <input type="checkbox"/> Parents as Teachers _____ |
| <input type="checkbox"/> Preschool Special Education _____ | <input type="checkbox"/> Others not listed _____ |

Why do you feel that your child would be ready for a kindergarten program? Comment on your child's social behavior and academic skills. (Use reverse side, if needed.)

Signature of Parent/Guardian: _____ **Date:** ___/___/___

Return completed form to your school by May 29th.

Parent Checklist for Early Entrance to Kindergarten

The seven broad developmental dimensions below provide the framework for the kindergarten instructional program. This checklist will help in determining your child's readiness for our kindergarten program. Please read each statement and rate your child's abilities using the following ratings: **F** = frequently, **S** = sometimes, and **N** = none of the time.

	Frequently (F)	Sometimes (S)	None of the Time (N)
Physical Well-Being and Motor Development			
Performs self-help tasks independently (dressing, undressing, zipping, and tying)	_____	_____	_____
Uses eye/hand coordination to perform fine motor tasks (drawing, writing, and cutting)	_____	_____	_____
Uses balance and control to perform large motor tasks (walking, jumping, and skipping)	_____	_____	_____
Personal and Social Development			
Shows eagerness to learn (is curious, likes to investigate)	_____	_____	_____
Follows rules and routines (cleans up at play time)	_____	_____	_____
Handles change and transition (dinnertime to bedtime)	_____	_____	_____
Interacts easily with one or more children	_____	_____	_____
Language and Literacy			
Listens for meaning in stories, discussions, and conversations	_____	_____	_____
Speaks clearly, to share ideas and thoughts	_____	_____	_____
Can identify upper and lowercase letters	_____	_____	_____
Can identify and produce beginning sounds	_____	_____	_____
Uses some letters and words to write	_____	_____	_____
Shows some understanding of concepts about print	_____	_____	_____
Identifies and produces rhyming words	_____	_____	_____
Associates sounds with corresponding letters	_____	_____	_____
Identifies story elements (ex. characters, setting, plot)	_____	_____	_____
Engages in individual writing activities	_____	_____	_____
Writes a complete thought	_____	_____	_____
Recognizes some sight words	_____	_____	_____
Mathematical Thinking			
Can recognize numbers 0-31	_____	_____	_____
Can orally count forward to 31	_____	_____	_____
Can recognize, duplicate, and extend simple patterns (circle-triangle, circle triangle, circle triangle)	_____	_____	_____
Can recognize and describe some shapes	_____	_____	_____
Counts objects to 31	_____	_____	_____
Identifies coins and value	_____	_____	_____
Uses and explains strategies to solve mathematical problems	_____	_____	_____
Demonstrates a beginning understanding of time relations	_____	_____	_____

Scientific Thinking

Uses a magnifying glass to look at different objects

Categorizes animals into groups that move by hopping, running, or flying

Describes characteristic and basic needs of living things (food, water, shelter)

Social Studies

Recognizes self and others as having same and different characteristics

Describes roles and responsibilities of people (Daddy is a fireman. He puts out fires.)

Recognizes the reasons for rules

The Arts

Likes to paint and draw

Likes to sing and dance

Can share ideas about a drawing/painting
