



### Parent Checklist

The five broad developmental dimensions 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 indicate your child's abilities as listed below by checking the appropriate column. Your responses will be used as part of the evaluation procedure.

Physical Well-Being and Motor Development	Frequent	Sometimes	None of the Time
Performs self-help tasks independently (dressing, 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.			
<b>Personal and Social Development</b>			
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			
<b>Language and Literacy</b>			
Listens for meaning in stories, discussions and conversations			
Speaks clearly to share ideas and thoughts.			
Can identify letters			
Can identify beginning sounds			
Uses letters and words to write			
Writes name			



6. What does your child know about numbers, shapes, and patterns?

7. What are some of the things you do to help your child learn?

8. How does your child interact with other children? Please explain and consider whether or not your child shares, takes turns, and cooperates with peers.

9. Please provide any other information which you feel will be helpful in determining your child's readiness for school.

**PERMISSION FOR EVALUATION:**

I hereby give my permission to Racine Unified School District to evaluate my child to determine if he/she meets the requirements for early admission to Kindergarten.

I understand that in order to be considered for early admission, my child would have to demonstrate developmental readiness in fine motor, gross motor, overall cognitive abilities, and social/emotional development. This is to ensure that my child will be able to experience success in a Kindergarten class.

I give permission to gather information related to early admission from my child's current early childhood program.

In the event that initial placement in the program is approved, I understand that there will be a one-month trial placement. If after one month my child is not successful, I will be contacted by the classroom teacher and Gifted and Talented Coordinator to review placement.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**RETURN COMPLETED FORM TO PRIOR TO MAY 1:**

**JUDY SHAFFER  
GIFTED AND TALENTED COORDINATOR  
ADMINISTRATIVE SERVICES CENTER, BUILDING 1**