

Kindergarten Recommendation Form

Child's Name _____ Current School _____
 Entering Year _____ School Address _____
 Birth date _____ City/State/Zip _____
 Your Name _____ School Telephone _____
 Current Position _____ School E-mail _____
 How long and in what capacity have you known the applicant?

To the teacher or school director: We appreciate your cooperation in completing this form. It provides one way of getting to know the child and is reviewed with the full awareness that young children are constantly changing and developing. **This evaluation will be kept in strict confidence, will be reviewed only by the Faculty Admissions Decision Committee and will not become part of the student's permanent record.** Your insights will be used solely to help inform a thoughtful decision which will result in the best placement for each child. Thank you.

Development	Area of Strength	Age Appropriate	Progressing Towards Age Appropriate	Possible Area of Concern	Comments
Exhibits self esteem					
Exhibits self control					
Accepts responsibility for behavior					
Solves problems constructively					
Accepts limits					
Is considerate					
Cooperates with teachers					
Respects needs & property of others					
Shares well					
Cooperates with peers					
Is able to make choices					
Willing to try new activities					
Responds positively to constructive criticism					
Initiates play activities					
Has the capacity to lead					
Has the capacity to follow					
Is comfortable with adults					
Is responsive to adults					
Is respectful of adults					
Adjusts to transitions					

Academic Readiness	Area of Strength	Age Appropriate	Progressing Towards Age Appropriate	Possible Area of Concern	Comments
Functions independently					
Asks for help when needed					
Sustains attention in small & large groups					
Participates in group discussions					
Follows 2-3 step directions					
Completes tasks in allotted time					
Can focus on one task					
Respects class routines					
Is a self-starter					
Expresses ideas clearly					
Articulates clearly					
Grasps concepts					
Recalls details					
Demonstrates an interest in learning					
Physical Development					
Has or exhibits large muscle control and coordination					
Has or exhibits small muscle control and coordination					
Eye-hand coordination					
Pencil grasp & hand dominance					
Exhibits self-help skills (e.g. hand-washing, bathroom, etc.)					
Easily tolerates a variety of sensory stimuli					
Awareness of personal space					
Family Information	Consistently	Usually	Sometimes	Rarely	Comments
Communicates openly with school					
Participates in school activities					
Cooperates with classroom teachers					
Cooperates with administration					
Follows the rules & policies of the school					
Has realistic expectations for their child					
Meets financial obligations in timely manner					

Are there any special needs or required modifications for this student? Please explain on a separate piece of paper along with any additional comments in any category. Thank you for your assistance.