

Early Admissions to Kindergarten Application Packet

(confidential)

The forms inside this packet must be filled out completely in order for a child to be considered for early admissions into the Kindergarten program. Each application being considered for early admissions must meet the following criteria:

- the child turns 5 between September 2 and October 15
- the application packet includes two letters documenting the child's capabilities from someone with knowledge of this child in comparison to other children this age
- the child's application packet is submitted between May 1 and June 1

If the child meets these criteria a screening team will review the application packet. If there is evidence demonstrating capabilities warranting further assessment, the parent will be notified and a formal assessment will be scheduled. The formal assessment will be conducted between June 15 and July 15. The results of this assessment will be used to make a decision regarding early admission and will be kept confidential. Once the assessment is completed, the parent will be notified of a meeting to discuss the results and make a determination regarding early admission. You will also be notified in writing of the team's decision. A 30 day observation period will be conducted before the placement is finalized and a child's early placement in the kindergarten may be discontinued if necessary and in the best interest of the child.

If there is no evidence demonstrating capabilities warranting further assessment, the parent will be notified that the request for early admissions is denied. A denial of early entrance does not mean that the child will be automatically accepted into the Prekindergarten program.

At any point, a denial of early admissions can be appealed as per Talbot Count Public Schools Policy BDEA.

I have read and understand the process involved in early admissions.

Child's name _____
Parent Signature _____

FOR OFFICE USE ONLY

Child's Name: _____ Date Received _____ Initials of Recipient _____

_____ Conference held with parent (date: ___/___/___) Principals Initials: _____ Packet reviewed by: _____

- _____ Parent application
- _____ Parent checklist
- _____ Two letters of documentation
- _____ Preschool Survey
- _____ Other documentation as provided by parent/guardian

date: ___/___/___ Application sent to Early Childhood Office	_____ denied early admissions	_____ refers for further assessment
date: ___/___/___ Screening team reviews application packet.	_____ denied early admissions	_____ refers for further assessment
date: ___/___/___ Assessment conducted		
date: ___/___/___ Team meets to review assessment results	_____ appeal denied	_____ appeal upheld
date: ___/___/___ Parents notified of the decision in writing	_____ Continuation of placement	_____ placement discontinued
date: ___/___/___ Parents request an appeal.	_____ appeal denied	_____ appeal upheld
date: ___/___/___ Observation period completed.		
date: ___/___/___ Parents request an appeal.		

APPLICATION FOR EARLY ENTRANCE Kindergarten Program



12 Magnolia Street, Easton, MD

410-822-0330

21601

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.

Child's name _____ Birthdate ____/____/____
Last First MI

Gender: Male Female Race: _____ Birthdates of siblings: ____/____/____, ____/____/____, ____/____/____, ____/____/____

Address: _____
Street City State Zip code

Parent/Guardian name _____

Phone (home) _____ (work) _____ (cell) _____ email _____

Preferred method of contact _____

Preschool Experience:

List the nursery schools, Head Start, special education program, and/or other day care programs attended. Include the dates of attendance and the approximate number of hours per week attended.

Name of School/Program	Dates of Attendance	# of Hours/Week
_____	From _____ to _____	_____
_____	From _____ to _____	_____
_____	From _____ to _____	_____
_____	From _____ to _____	_____

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 the reverse side or additional paper if needed.

Signature, Parent/Guardian ____/____/____
Date

Parent Checklist

This checklist will help in determining your child's readiness for our kindergarten program. Please read each statement carefully and rate your child's abilities using the following ratings: **F** = frequently, **S** = sometimes, and **N** = never.

	Frequently (F)	Sometimes (S)	Never
Physical Well-Being and Motor Development			
Performs self-help tasks independently (dressing, undressing, zipping, tying, toileting, etc.)			
Uses eye/hand coordination to perform fine motor tasks (drawing, writing, and cutting)			
Uses balance and control to perform large motor tasks (walking, jumping, hopping, skipping, throwing, etc.)			
Personal and Social Development			
Adjusts quickly to new situations			
Understands and responds to jokes and humor			
Shows eagerness to learn (is curious, likes to investigate)			
Follows rules and routines			
Handles change and transition			
Works and plays cooperatively with other children			
Language and Literacy			
Listens for meaning in stories, discussions, and conversations			
Picks up and attempts to read books			
Points out words and asks about them (what they say, mean, etc.)			
Asks and answers questions based on listening activities			
Speaks clearly to share ideas and thoughts			
Can identify 21-26 upper case and 21-26 lower case letters			
Can identify common sounds for 21-26 letters			
Uses letters and words to write			
Writes first name correctly			
Recognizes rhyming words			
Mathematical Thinking			
Can recognize a set of 0-5 dots in a pattern without counting (for example, like on dice)			
Can recognize numbers 0-10			
Can orally count forward to 20			
Can count at least 10 objects			
Can recognize, duplicate, and extend simple patters (A B, A, B, A, ____, for example)			
Can recognize and describe shapes (circle, square, rectangle, triangle, oval)			
Scientific Thinking			
Uses a magnifying glass to look at different objects			
Categorizes objects based on attributes			
Describes characteristics and basic needs of living things			
Social Studies			
Recognizes self and others as having same and different characteristics			
Describes roles and responsibilities of people			
Recognizes the reasons for rules			
The Arts			
Likes to paint and draw			
Likes to sing and dance			
Can share ideas about a drawing/painting			

Other Prior Care Survey

Child's name _____

Birth Date _____

Preschool _____

Dates of Attendance _____

Person completing the Survey: _____

Relationship to child _____

	Frequently (F)	Sometimes (S)	Never
Physical Well-Being and Motor Development			
Performs self-help tasks independently (dressing, undressing, zipping, tying, etc.)			
Uses eye/hand coordination to perform fine motor tasks (drawing, writing, and cutting)			
Uses balance and control to perform large motor tasks (walking, toileting, jumping, hopping, skipping, throwing, etc.)			
Personal and Social Development			
Adjusts quickly to new situations			
Understands and responds to jokes and humor			
Shows eagerness to learn (is curious, likes to investigate)			
Follows rules and routines			
Handles change and transition			
Works and plays cooperatively with other children			
Cognitive Skills/Growth			
Generates multiple ways to solve problems			
Demonstrates persistence in solving problems and performing tasks			
Uses skills from previous situations to solve new problems			
Language and Literacy			
Listens for meaning in stories, discussions, and conversations			
Asks and answers questions based on listening activities			
Picks up and attempts to read books			
Points out words and asks about them (what they say, mean, etc.)			
Speaks clearly to share ideas and thoughts			
Recalls a simply story by retelling, acting it out, or drawing pictures			
Can identify 21-26 upper case and 21-26 lower case letters			
Can identify common sounds for 21-26 letters			
Uses letters and words to write			
Writes first name correctly			
Recognizes rhyming words			
Mathematical Thinking			
Can recognize a set of 0-5 dots in a pattern without counting (for example, like on dice)			
Can recognize numbers 0-10			
Can orally count forward to 20			
Can count at least 10 objects			
Can recognize, duplicate, and extend simple patters (A B, A, B, A, _____, for example)			
Displays strong interest in mathematical activities, incorporating concepts of geometry, measurement, ordering, time, and money			
Can recognize and describe shapes (circle, square, rectangle, triangle, oval)			
Scientific Thinking			
Uses a magnifying glass to look at different objects			
Categorizes objects based on attributes			
Describes characteristics and basic needs of living things			
Social Studies			
Recognizes self and others as having same and different characteristics			
Describes roles and responsibilities of people			
Recognizes the reasons for rules			
The Arts			
Likes to paint and draw			
Likes to sing and dance			
Can share ideas about a drawing/painting			

Early Admissions to Prekindergarten Application Packet

(confidential)

The forms inside this packet must be filled out completely in order for a child to be considered for early admissions into the Prekindergarten program. Each application being considered for early admissions must meet the following criteria:

- the child turns 4 between September 2 and October 15
- the application packet includes two letters documenting the child's lack of readiness from someone with knowledge of this child in comparison to other children this age
- the child is income eligible (that is, he/she qualifies for Free and Reduced Meal Program)
- the child's application packet is submitted between May 1 and June 1

If the child meets these criteria a screening team will review the application packet. If the child meets the necessary criteria, the child will be considered for early admissions. You will also be notified in writing of the team's decision. A 30 day observation period will be conducted before the placement is finalized. The child's early placement in the prekindergarten program may be discontinued, if necessary and in the best interest of the child.

If the child does not meet the criteria for early admissions, the parent will be notified that the request for early admissions is denied.

At any point, a denial of early admissions can be appealed as per Talbot Count Public Schools Policy BDEA.

I have read and understand the process involved in early admissions.

Child's name _____

Parent Signature _____

FOR OFFICE USE ONLY

Child's Name: _____ Date Received _____ Initials of Recipient _____

_____ Conference held with parent (date: ___/___/___) Principals Initials: _____ Packet reviewed by: _____

- _____ Parent application
- _____ Parent checklist
- _____ Two letters of documentation
- _____ Preschool Survey
- _____ Other documentation as provided by parent/guardian

date: ___/___/___ Application sent to Early Childhood Office	_____ denied early admissions	_____ refers for further assessment
date: ___/___/___ Screening team reviews application packet.		
date: ___/___/___ Parents notified of the decision in writing		
date: ___/___/___ Parents request an appeal.	_____ appeal denied	_____ appeal upheld
date: ___/___/___ Observation period completed.	_____ Continuation of placement	_____ placement discontinued
date: ___/___/___ Parents request an appeal.	_____ appeal denied	_____ appeal upheld

APPLICATION FOR EARLY ENTRANCE

Prekindergarten Program



12 Magnolia Street, Easton, MD 21601
410-822-0330

Please complete this application if you feel that your child demonstrates academic needs, social, emotional, and/or physical immaturity or delays warranting early placement into the prekindergarten program for possibly **two** consecutive years.

Child's name _____ Birthdate ____/____/____
Last *First* *MI*

Gender: Male Female Race: _____ Birthdates of siblings: ____/____/____, ____/____/____, ____/____/____, ____/____/____

Address: _____
Street *City* *State* *Zip code*

Parent/Guardian name _____

Phone (home) _____ (work) _____ (cell) _____ (email) _____

Preferred method of contact _____

Primary language spoken at home _____

Preschool Experience:

List the nursery schools, Head Start, special education program, and/or other day care programs attended. Include the dates of attendance and the approximate number of hours per week attended.

Name of School/Program	Dates of Attendance	# of Hours/Week
_____	From _____ to _____	_____
_____	From _____ to _____	_____
_____	From _____ to _____	_____
_____	From _____ to _____	_____

Why do you feel that your child should be considered for early admissions into the Prekindergarten program? What are the specific areas in which you have concerns about your child's development? Use the reverse side or additional paper if needed.

Signature, Parent/Guardian

_____/_____/_____
Date

Parent Checklist

This checklist will help in determining your child’s readiness for our prekindergarten program. Please read each statement carefully and rate your child’s abilities using the following ratings: **F** = frequently, **S** = sometimes, and **N** = never.

	Frequently (F)	Sometimes (S)	Never
Physical Well-Being and Motor Development			
Needs assistance with self-help tasks independently (dressing, undressing, zipping, tying, etc.)			
Has difficulty with eye/hand coordination, when performing fine motor tasks (drawing, writing, and cutting)			
Has difficulty with balance and control to perform large motor tasks (walking, jumping, hopping, skipping, throwing, etc.)			
Personal and Social Development			
Has difficulty following simple rules and routines			
Has difficulty handling materials with care			
Has difficulty working and playing collaboratively with other children			
Language and Literacy			
Shows little interest in books and stories			
Has difficulty speaking clearly enough for others to understand			
Knows few letters			
Engages in songs and fingerplays			
Scribbles or draws to convey ideas			
Mathematical Thinking			
Shows beginning understanding of number and quantity			
Can orally count forward to 5			
Can recognize and duplicate a simple pattern (A B, A, B, A, for example)			
Can recognize and describe some shapes			
Scientific Thinking			
Asks questions and uses senses to observe and explore			
Tells how objects are alike and different			
Social Studies			
Identify ways people and families are the same and different			
Describes some jobs people have and what they need to do those jobs			
Shows an awareness of rules			
The Arts			
Likes to paint and draw			
Likes to sing and dance			
Can share ideas about a drawing/painting			

Other Prior Care Survey

Child's name _____

Birth Date _____

Preschool _____

Dates of Attendance _____

Person completing the Survey: _____

Relationship to child _____

	Frequently (F)	Sometimes (S)	Never
Physical Well-Being and Motor Development			
Needs assistance with self-help tasks independently (dressing, undressing, zipping, tying, etc.)			
Has difficulty with eye/hand coordination, when performing fine motor tasks (drawing, writing, and cutting)			
Has difficulty with balance and control to perform large motor tasks (walking, jumping, hopping, skipping, throwing, etc.)			
Personal and Social Development			
Has difficulty following simple rules and routines			
Has difficulty handling materials with care			
Has difficulty working and playing collaboratively with other children			
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Knows few letters			
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Can orally count forward to 5			
Can recognize and duplicate a simple pattern (A B, A, B, A, for example)			
Can recognize and describe some shapes			
Scientific Thinking			
Asks questions and uses senses to observe and explore			
Tells how objects are alike and different			
Social Studies			
Identify ways people and families are the same and different			
Describes some jobs people have and what they need to do those jobs			
Shows an awareness of rules			
The Arts			
Likes to paint and draw			
Likes to sing and dance			
Can share ideas about a drawing/painting			

COMMENTS (Use additional paper if needed)

- Please list the child's strengths.

- Please note any areas where you have concerns this child may demonstrate concerns or delays in development.)