



Kindergarten Skills Checklist – A Common Tool for Program Administrators

This common tool was developed collaboratively between the early childhood and school communities in Stark County, Ohio. The form is completed by the early childhood staff for all children entering kindergarten and forwarded to the local receiving school district.



TRANSITION SKILLS SUMMARY

Student: _____ Name used by Child: _____

Date of Birth: _____ Sex: M / F Early Childhood Service Provider: _____

Parents: _____ Program Director/Title: _____

Address: _____

Phone: _____ Person filling out this form /Title: _____

Family Structure: _____
(single parent, foster, etc.)

Any Suspected Disabilities? _____ Date Form Filled Out: _____

Special Education Services: Yes / No Name of Curriculum Used: _____

Existing Medical Conditions/Allergies: Yes / No

Please List: _____ Assessments Used: _____

Consent for Release of Information: _____

I give permission for _____ to share all information pertinent to the education
(Early Childhood Service Provider)

and safety of my child, _____ with _____
(Child's Name) (School District)

(Parent/Guardian Signature)

(School District of Residence)

(Parent/Guardian Printed Name)

(Elementary School)

(Date)

Right Handed / Left Handed (please circle)

Sample of Name Written by Child:

Attendance Data: _____

Enrolled in program from _____ / _____ to _____ / _____
Mo. Yr. Mo. Yr.

Attends regularly (please circle): Yes / No

Comments:

School District

(Date)

Copies: School District, Early Childhood Service Provider, Parent

Please see reverse side for additional information

Student: _____

KEY: M = Most of the Time D = Developing the Skill N = Not at this Time

CLASSROOM SETTING

- _____ Works/plays independently for short periods
- _____ Follows classroom rules
- _____ Follows classroom daily routine
- _____ Attends for 5-10 minutes in a group setting
- _____ Uses restroom independently
- _____ Makes transition:
 - _____ • from home to school
 - _____ • throughout the building
 - _____ • within the classroom
 - _____ • when there are changes in the daily routine

SOCIAL

- _____ Cooperates with others during play
- _____ Works with others
- _____ Adjusts to changes in routine
- _____ Trusts adults: Yes / No
- _____ Demonstrates cooperative behavior:
 - _____ • turn taking (with children/with adults)
 - _____ • helping others
 - _____ • sharing
- _____ Demonstrates self-control:
 - _____ • waiting for a turn
 - _____ • keeping hands to self

COMMUNICATION

- _____ Responds when name is called
- _____ Communicates wants and needs
- _____ Uses intelligible speech
- _____ Verbally expresses feelings/emotions appropriately
- _____ Answers simple questions about a story
- _____ Follows simple directions
- _____ Recites first and last name when asked

PRE-ACADEMIC

- _____ Identifies colors: Red Blue Green Yellow
Orange Black Brown Purple (*circle known colors*)
- _____ Identifies shapes: Circle Square Triangle
Rectangle (*circle known shapes*)
- _____ Identifies and describes a picture
- _____ Recognizes first name in print
- _____ Recognizes letters in first name
- _____ Prints first name (sample on front)
- _____ Identifies words that begin with the same sound
- _____ Identifies words that rhyme
- _____ Sings simple songs/repeats rhymes
- _____ Identifies and names numerals 0-9
- _____ Counts using 1:1 correspondence to at least 5

MOTOR DEVELOPMENT

Gross Motor:

- _____ • Demonstrates ability to: hop jump climb
balance (*circle skills accomplished*)
- _____ • Demonstrates spatial awareness, position of body
in space

Fine Motor:

- _____ • Works appropriately with scissors
- _____ • Works appropriately with crayons, markers, pencils
- _____ • Works appropriately with puzzles, Legos, other
manipulatives
- _____ • Demonstrates awareness of spatial relationships
- _____ • Manages clothing independently

PLEASE PRINT ALL INFORMATION

Comments: (Is there any information specific to this child that would assist the Kindergarten teacher?
Include information about successful teaching strategies, child's strengths, child's needs, etc.)

