



Birchwood School

Potential is a Gift
Excellence is a Habit

Dear Preschool Teacher:

The parent who has given you this form is applying to our kindergarten for his/her child. We are asking if you would kindly take a few minutes to complete this form. We have a heavy emphasis on individualized instruction which enables us to meet all of the needs of our students. When you are finished please mail it to my attention at the Birchwood School. Thank you for your time.

Warm regards,
Donna Parrino
Director of Admissions

Name of the Child _____

Feel free to elaborate or comment as needed.

What are three adjectives that come to mind when you think of this student?

This child:

Perseveres at a task _____ Yes _____ No _____ Sometimes

Maintains calm and focus _____ Yes _____ No _____ Sometimes

Works independently _____ Yes _____ No _____ Sometimes

Exhibits self-control and regulation in relation to others _____ Yes _____ No _____ Sometimes

Demonstrates understanding of the cooperative principle _____ Yes _____ No _____ Sometimes

Recognizes potentially hazardous or dangerous situations when moving through the environment _____ Yes _____ No _____ Sometimes

Recites nursery rhymes and sings songs _____ Yes _____ No _____ Sometimes

Looks at pictures/illustrations in books, magazines, newspapers _____ Yes _____ No _____ Sometimes

Selects books he/she would like to have an adult read to him/her _____ Yes _____ No _____ Sometimes

“Pretends” to read by holding a book, turning pages and making up a story _____ Yes _____ No _____ Sometimes

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Dramatizes parts of stories	___ Yes	___ No	___ Sometimes
Retells parts of repetitive texts of stories	___ Yes	___ No	___ Sometimes
Talks about characters and events in storybooks in ways that suggest an understanding of what has been read	___ Yes	___ No	___ Sometimes
Uses picture cues to recall or predict story events	___ Yes	___ No	___ Sometimes
Describes own drawings or tells a story about them	___ Yes	___ No	___ Sometimes
Dictates stories to accompany their own drawings	___ Yes	___ No	___ Sometimes
Imitates reading and writing behaviors	___ Yes	___ No	___ Sometimes
Uses a combination of scribbling, letter approximations and letters to write own name and other words/phrases	___ Yes	___ No	___ Sometimes
Identifies signs and labels in the environment	___ Yes	___ No	___ Sometimes
Reads Sight words such as "STOP" and "YES"	___ Yes	___ No	___ Sometimes
Expresses feelings or emotions using words or gestures that others can interpret	___ Yes	___ No	___ Sometimes
Engages in conversations that develop a thought or idea	___ Yes	___ No	___ Sometimes
Takes turns	___ Yes	___ No	___ Sometimes
Specifies, changes, and maintains a topic	___ Yes	___ No	___ Sometimes
Asks conversational questions	___ Yes	___ No	___ Sometimes
Requests and provides clarification	___ Yes	___ No	___ Sometimes

Is there anything else you feel would be helpful for us to know?

Name of Teacher (Print) _____

School _____ Phone no. _____

School address, city, zip _____

Signature _____ Date _____