Immanuel Lutheran School – Silo KEYS TO KINDERGARTEN

Student Name:	Age:	Date of Birth:
	-	

Children develop at different paces. This is a guide to help you prepare for your child's kindergarten experience. While not every skill below has to be mastered before kindergarten, these are skills that we look for mastery on by the end of kindergarten. Please mark the boxes for each descriptor that applies to your child most of the time. Please return this form with the other kindergarten registration forms.

Social/Emotional/Behavior

- Interacts/plays/shares with others
- Waits and takes turns
- Adjusts to new situations, transitions, including cleaning up
- Makes independent choices
- □ Attends to an activity or story for 10+ minutes
- Uses please and thank you
- Covers coughs and sneezes

Physical

- Manages bathroom needs and washes hands independently
- Dresses and undresses oneself including buttons or zippers
- Puts on and fastens own shows independently
- Cuts, traces, paints, draws, and holds a pencil
- Plays with puzzles
- □ Runs, hops, jumps, throws, and catches

Language

- Verbally expresses wants and needs
- Talks about everyday activities
- □ Initiates conversation in play (i.e. asks a friend to play)
- □ Asks and answers questions
- Says full name
- Has been read to individually or in groups
- Exposed to a variety of literature (Bible stories, fairy tales, nursery rhymes, poetry, fiction/nonfiction)
- Understands print (finds letters or words)
- Uses pictures in books to tell a story
- Rhymes words or identifies beginning sounds
- Recognizes a majority of alphabet letters from random order
- Identifies sounds of alphabet letters
- Recognizes first name in print
- Writes first name using upper and lower case letters
- Beginning to know phone number, address, and birthday

Cognitive

- Sorts items by color, shape, and size
- Recognizes colors
- □ Identifies shapes: square, circle, triangle, rectangle, rhombus
- Counts to 20 and counts objects
- □ Recognizes numbers 0-10 from random order
- □ Identifies short patterns (i.e. red, blue, red, blue or circle, square, triangle, circle..)
- Has had exposure to coins

General Health

Allergies		Other			
Is your child on a	ny kind of medication?	What?	What?		
Do you feel your	child will need any specie	al help in the following areas (circle o	all areas of concern):		
Hearing / Vision ,	/Speech				
Does your child w	vear glasses or contacts?				
Personality Traits Please answer the follow	ving Yes / No questions reg	garding your child.			
Cries easily	Yes / No	Daydreams	Yes / No		
ls cooperative	Yes / No	Is easily angered	Yes / No		
Is moody	Yes / No	Is easily frustrated	Yes / No		
Has temper tantı	rums Yes / No	Is fearful in new situations	Yes / No		
Which of these words or	phrases best describes yo	our child?			
self-control	led or lacks self-cor	ntrol			
independe	ent or dependent	or dependent			
pleasant	or disagreeabl	or disagreeable			
attentive	or inattentive				
confident	or shy				
follows dire	ctions or doesn't fol	llow directions			

What do you expect your child to acquire through the kindergarten experience?