

**FRANKLIN PUBLIC SCHOOLS
PRESCHOOL INVENTORY FORM
FOR CHILDREN ENTERING KINDERGARTEN**

PARENT/GUARDIAN: Please complete this information section and give the form to your child's Preschool, Nursery School or Child Care program to complete.

Child's Name _____ Date _____

Preschool/Nursery School/Child Care Program _____

PRESCHOOL/NURSERY SCHOOL/ DAY CARE TEACHER: Please complete the information below and check the appropriate box next to each statement. Add any comments that would help us facilitate this child's transition, adjustment, and progress in kindergarten.

Form completed by: _____

Child attends: ☐ full day ☐ half day How many days per week? _____

Adult:Student ratio: _____

	With Support	Independent	Comments
GROUP WORK			
Interacts appropriately in groups (turn-taking, listening, asking questions, etc.)			
Participates actively in discussions, listens to ideas, asks/answers relevant questions			
Participates in the group life of the class			
Demonstrates an appropriate attention span in large group setting for at least fifteen minutes			
READING AND LITERACY			
Engages in read aloud activities by asking questions, offering ideas, predicting or retelling			
Verbally expresses ideas in sentence form			
Retells or sequences a familiar story			
Identifies letters in own name			
MATHEMATICS			
Shows curiosity and interest in numbers and counting			
Sorts, categorizes, and classifies objects			
Explores math manipulatives			

COMPOSITION	With Support	Independent	Comments
Copies or writes own name			
Draws pictures to tell a story			
SOCIAL and EMOTIONAL SKILLS			
Plays well with peers			
Seeks adult attention appropriately			
Accepts adult assistance			
Beginning to understand the reasons for rules, fairness and personal responsibility			
Demonstrates age appropriate play skills			
Demonstrates a positive attitude and self-image			
Manages transitions within the classroom			
Demonstrates self-regulation ability			
Demonstrates empathy and respect for others			
FINE MOTOR			
Handedness: <input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> Undecided			
Uses thumb and forefinger pincer grasp			
GROSS MOTOR			
Uses playground structures independently			
SELF HELP			
Uses bathroom independently			
Keeps track of and cares for own belongings			
Dresses self independently			

Additional comments: Talents, skills, interest, or special needs:

Thank you! This form should be returned to the child's parents for submission to the Franklin Public Schools. Parents should submit this form to their elementary school no later than the Parent Information Night in May.