**

Preschool Readiness Checklist**

**Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_**

**Age: \_\_\_\_\_\_\_\_\_**

**The following items are designed to help parents understand whether their child is ready for entering kindergarten. The ratings are as follows: Always-3, Sometimes-2, and Never-1. Place the DATE in the box signifying when the parent responded to an item, thereby keeping a record of the child’s readiness. When scoring, assign the points based on the most recent administration of the Checklist.**

**As you interview the parent or primary caregiver, begin each item with the phrase: *“How often does your child….”***

**I. Concept Development**

|  |  |  |  |
| --- | --- | --- | --- |
| **How often does your child:** | **Always** | **Sometimes** | **Never** |
| Recognize and/or name 6-8 colors? |  |  |  |
| Match or sort items by color and shape? |  |  |  |
| Join in art and music activities? |  |  |  |
| Understand concepts such as: in, out, under, on, off,front and back? |  |  |  |
| Know his/her body parts (head, shoulder, knee, foot, etc.)? |  |  |  |
| Draw a picture of himself/herself that includes a head,body, arms and legs? |  |  |  |
| Demonstrate curiosity, persistence and exploratory behavior? |  |  |  |

**Total: /21** (Date 1:\_\_\_\_\_\_) **/21** (Date 2:\_\_\_\_\_\_)  **/21** (Date 3):\_\_\_\_\_\_

**II. Physical Development**

|  |  |  |  |
| --- | --- | --- | --- |
| **How often does your child:** | **Always** | **Sometimes** | **Never** |
| Put together a simple puzzle? |  |  |  |
| Cut with scissors? |  |  |  |
| Tie or try to tie his/her shoes? |  |  |  |
| Enjoy outdoor play such as: running, jumping, climbing? |  |  |  |
| Hold a crayon, marker, or pencil? |  |  |  |
| Ride a tricycle? |  |  |  |
| Bounce a ball? |  |  |  |
| Throw and catch a ball? |  |  |  |

**Total: /24** (Date 1:\_\_\_\_\_\_) **/24** (Date 2:\_\_\_\_\_\_)  **/24** (Date 3):\_\_\_\_\_\_

**III. Number Concept Development**

|  |  |  |  |
| --- | --- | --- | --- |
| **How often does your child:** | **Always** | **Sometimes** | **Never** |
| Arrange items in groups according to size, shape and color? |  |  |  |
| Group items that are the same? |  |  |  |
| Arrange toys or objects in size order from big to small or from small to big? |  |  |  |
| Use words like bigger, smaller, heavies to show comparison? |  |  |  |
| Compare the size of toys or items? |  |  |  |
| Correctly count 4 to 10 objects? |  |  |  |
| Show an understanding of the passing of time? |  |  |  |

**Total: /21** (Date 1:\_\_\_\_\_\_) **/21** (Date 2:\_\_\_\_\_\_)  **/21** (Date 3):\_\_\_\_\_\_

**IV. Language Development**

|  |  |  |  |
| --- | --- | --- | --- |
| **How often does your child:** | **Always** | **Sometimes** | **Never** |
| Talk in complete sentences? |  |  |  |
| Follow one/two step directions you give him/her? |  |  |  |
| Use descriptive language? (“That’s a **big** dog with **brown** spots”) |  |  |  |
| Use simple sentences in conversation? (I liked the movie) |  |  |  |
| Sing or recite nursery rhymes? |  |  |  |
| Pretend, create and make up songs and stories? |  |  |  |
| Talk about everyday experiences? |  |  |  |
| Ask questions about how things work.  |  |  |  |
| Expresses ideas in a way people around him/her understand?  |  |  |  |
| Tells or retells a story? |  |  |  |

**Total: /30** (Date 1:\_\_\_\_\_\_) **/30** (Date 2:\_\_\_\_\_\_)  **/30** (Date 3):\_\_\_\_\_\_

**V. Writing Development**

|  |  |  |  |
| --- | --- | --- | --- |
| **How often does your child:** | **Always** | **Sometimes** | **Never** |
| Try to write, scribble or draw? |  |  |  |
| Have access to paper, pencils, crayons, or markers? |  |  |  |
| Like to receive notes from you and others? |  |  |  |
| Ask you to play with him/her writing notes to people? |  |  |  |
| Try to write his/her name? |  |  |  |
| Try to write numerals 1-10? |  |  |  |

**Total: /18** (Date 1:\_\_\_\_\_\_) **/18** (Date 2:\_\_\_\_\_\_)  **/18** (Date 3):\_\_\_\_\_\_

 **VI. Social & Emotional Development**

|  |  |  |  |
| --- | --- | --- | --- |
| **How often does your child:** | **Always** | **Sometimes** | **Never** |
| Use words to solve problems when angry or frustrated? |  |  |  |
| Use words such as please, thank you and excuse me? |  |  |  |
| Attempt new tasks knowing it is okay to make mistakes? |  |  |  |
| Take turns or share with other children? |  |  |  |
| Make friends easily and interacts with them appropriately? |  |  |  |
| Ask for help when he/she needs it? |  |  |  |
| Stay doing an activity until it is completed? |  |  |  |
| Follow rules, limits and routines? |  |  |  |

**Total: /24** (Date 1:\_\_\_\_\_\_) **/24** (Date 2:\_\_\_\_\_\_)  **/24** (Date 3:\_\_\_\_\_\_)

**This section is directed to how often the parent(s) interact with their child around school readiness. Begin each item with the phrase: *“How often do you….”***

**VII. Parent Involvement**

|  |  |  |  |
| --- | --- | --- | --- |
| **How often do you…** | **Often** | **Sometimes** | **Never** |
| Talk to your child about your day or experiences? |  |  |  |
| Talk to your child about your experiences in school? |  |  |  |
| Read to your child? |  |  |  |
| Talk to your child about going to preschool, Head Start or Kindergarten?  |  |  |  |
| Play “school” with your child to show what going to school is about? |  |  |  |

**Total: /15** (Date 1:\_\_\_\_\_\_) **/15** (Date 2:\_\_\_\_\_\_)  **/15** (Date 3:\_\_\_\_\_\_)

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**Scoring: Total each section. NOTE: For children 3-4 years old, Ready for School is 92 and above. For children 5-6 years old, Ready for School is 122 and above.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Area** | **Points Received** | **Possible Points** | **3-4 Years** | **5-6 Years** |
| **Date 1** | **Date 2** | **Date 3** |
| I. | Concept Development |  |  |  | 21 |  |  |
| II | Physical Development |  |  |  | 24 |
| III. | Number Concept Development |  |  |  | 21 |
| IV. | Language Development |  |  |  | 30 |
| V. | Writing Development |  |  |  | 18 |
| VI. | Social & Emotional Development |  |  |  | 24 |
| VII. | Parent Involvement |  |  |  | 15 |
| TOTAL |  |  |  | 153 |
| **Age Designation as Ready for School**  | **92** | **122** |

**Is the child Ready for School? (Yes/No) Date 1: \_\_\_\_\_ Date 2: \_\_\_\_\_ Date 3: \_\_\_\_\_**