

**INDEPENDENT SCHOOLS ADMISSIONS
ASSOCIATION OF GREATER NEW YORK**

**SCHOOL REPORT FOR APPLICANT TO 3-
AND 4-YEAR-OLD GROUPS**

Child's Name _____ Sex _____ Birthdate _____

Name Usually Called _____ Present School _____

Phone _____ Address _____ Zip _____

Entrance Date: _____ Currently attends: Days per week _____ Hours per day _____ Date of This Report _____

Submitted by _____ How long have you known this child? _____

Language spoken at home _____ Does this child speak other languages? _____

Dominance: Right _____ Left _____ Not Established _____

CATEGORY	AREA OF STRENGTH	AGE APPROPRIATE	PROGRESSING TOWARDS AGE APPROPRIATE	N/A
PHYSICAL DEVELOPMENT				
Gross Motor Coordination				
Participates in physical group activities				
Gait, fluidity, smoothness of movement				
SMALL MOTOR COORDINATION				
Participates in small motor activities				
Works with playdoh, clay, water, sand				
Builds with blocks or manipulatives				
Draws, paints or glues				
Uses implements (fork/spoon) to feed self				
GENERAL HEALTH				
Energy level (outdoors/classroom)				
PERCEPTUAL DEVELOPMENT				
Completes puzzles (how many pieces?)				
Notices, creates, replicates patterns				
Recognizes written name				

Comment: What is the child's favorite large-motor activities?

What are the child's favorite small-motor or perceptual activities?

CATEGORY	AREA OF STRENGTH	AGE APPROPRIATE	PROGRESSING TOWARDS AGE APPROPRIATE	N/A
SOCIAL EMOTIONAL DEVELOPMENT				
Separation from parents/caregivers				
Displays confidence				
Accepts limits/boundaries				
Willingly follows directions individually				
Willingly follows directions in group				
Displays impulse control				
Engages with peers (describe below)				
Engages with adults (describe below)				
Makes eye contact				
Resolves conflicts/ disputes verbally				
Respects other/items				
Tolerates frustration/ self-chosen activity				
Tolerates frustration/ assigned activity				
Appreciates humor/ appropriately silly				
Ability to focus on an activity				
Cooperative attitude				
Makes transitions easily				
Reacts positively to new events/change				

How would you describe the child's temperament?

What activities does the child especially enjoy?

Please describe the quality of this child's interactions with classmates. Does the child play with children of both genders, show a preference for group or individual activities? Is the child a leader, follower, observer? Is the child kind to and considerate of other children?

Please describe the quality of this child's interactions with adults.

CATEGORY	AREA OF STRENGTH	AGE APPROPRIATE	PROGRESSING TOWARDS AGE APPROPRIATE	N/A
INTELLECTUAL DEVELOPMENT				
RECEPTIVE SKILLS				

Ably follows directions given to group				
Ably follows directions given individually				
Converses with adults and children				
EXPRESSIVE SKILLS				
Clear articulation (describe)				
Fluency of expression (as opposed to stammering)				
Vocabulary: uses precise words as opposed to fillers ('uhm')				
Remembers classmates'/teachers' names				
Remembers and recites nursery rhymes				
Remembers and retells events/stories in sequence				
Creates dramatic play scenarios				
Asks <i>why, how come</i> questions				
EMERGENT LITERACY				
Handles, browses, looks over books				
Enjoys being read to/ ask to be read to				
Acts out favorite stories (books/media)				
EMERGENT MATH				
Sorts objects in categories (animals/plants)				
Grades objects by size				
Names colors or shapes in environment				
Uses size comparison				
Understands over, under...				

Comment: Please comment on the child's language and speech development. Has the child been recommended for speech or language evaluation or therapy? Any idiosyncratic language? (Please be specific.)

Please comment briefly on any physical, social-emotional, or intellectual strengths or concerns, including general health.

FAMILY

Is there anything significant about the home life which will help us understand this child? (new baby, move, divorce/separation)

Have all financial obligations been met?

Have you received active cooperation from the parents?

To your knowledge, is the parent's perception of the child compatible with the school's understanding of the child?

Please describe parents' involvement with the school.

Signature (Position)

Date

These comments will be helpful to us in deciding if our school program will be able to meet this student's needs. We thank you for taking the time to aid us in understanding this candidate better. All information is CONFIDENTIAL.

Please return this form to Metropolitan Montessori School's Admissions Office: