

# Application for School Readiness Kindergarten Program



Please complete this application if you feel that your child demonstrates academic, achievement, social, emotional and physical maturity appropriate for kindergarten placement, has a birthdate that occurs between August 1<sup>st</sup> and October 1<sup>st</sup>, and should be considered for early placement in kindergarten. Return the completed form to your school.

**Child's Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_  
Last First Middle

**Address** \_\_\_\_\_  
Street City State Zip Code

<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Ethnicity: Is student Hispanic or Latino? (select one answer)</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Race Designation: ( select ALL that apply):</b> <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
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**Parent/Guardian Name:** \_\_\_\_\_

**Phone:** Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

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### Preschool Experience

Please list the preschools, Prekindergarten, Head Start, child care center, special education program, and any other day care program your child has attended. Include the dates of attendance and the approximate hours per week attended.

Name of School/Program	Dates of Attendance	# Hours/Week

I hereby certify that the above information is true and correct. I understand that this information is being provided for possible early admission to kindergarten, and that school officials may verify the information on this form. I understand that if any of the information above is false, it is possible that my child may not be considered or may be removed from the program once enrolled. I also understand that my child may be only assessed once for Early Entrance to Kindergarten.

**Parent/Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Appeals:** Must be made in writing (please state reason and any additional information) within 30 days of the date of this decision to: Pike County Schools, Department of Instruction, 316 South Mayo Trail, Pikeville, KY 40501



Application for School Readiness  
 Parent/Guardian Checklist  
 Pike County Schools



Directions: Please read each statement and indicate your child's abilities as listed below by checking the appropriate column.

<b>General Knowledge and Mathematics</b>	<b>Always</b>	<b>Frequently</b>	<b>Sometimes</b>	<b>Never</b>
Sorts and classifies objects				
Notices similarities and differences				
Identifies basic colors				
Counts in sequence to 30				
Counts sets of objects up to 10				
Recognizes names, and copies basic shapes (including circle, square, triangle, rectangle)				
Ask such questions as who, what, when, where, why and how				
Understands simple concepts of time ( night, day, today, yesterday, tomorrow)				
<b>Self Help Skills</b>				
Uses the toilet without help				
Fastens and unfastens own clothing ( zipper, shoes, jacket without assistance)				
Feeds self-using utensils				
Helps put away toys or clothes				
Keeps track of personal belongings				
Covers mouth or nose when sneezing or coughing				
<b>Health and Physical Well-Being</b>				
Receives all required-immunizations and medical exams ( physical, dental, and vision)				
Runs, jumps, climbs and does other activities that develop large muscles and provide exercise				
Uses pencils, crayons, scissors, and paints and does other activities that help develop small muscles				
<b>Social and Emotional Development</b>				
Plays and shares with other children				
Follows simple rules and routines				
Expresses own needs and wants				
Explores and tries new things				
Separates easily from parents and family				
Works well alone				
Attends to tasks and seeks help when encountering a problem				
<b>Language and Communication Development</b>				
Speaks in five-to-six words sentences				
Sings simple songs				
Reads and writes own name				
Knows how books work				
Knows difference in print and pictures				
Recognizes familiar print from surrounds ( McDonald's Wal-Mart)				
Identifies upper and lowercase letters of alphabet				



Application for School Readiness  
Parent/Guardian Questionnaire  
Pike County Schools



**Directions: Please answer each question below. If additional space is needed, use the back of the form.**

1. Why do you think your child should be considered for early entrance to kindergarten? (Describe any behaviors, or accomplishments that would demonstrate your child's readiness.)
  
  
  
  
  
  
  
  
  
  
2. How does your child handle new situations or an unfamiliar activity?
  
  
  
  
  
  
  
  
  
  
3. Describe how your child reacts to frustration or handles conflicts with others.
  
  
  
  
  
  
  
  
  
  
4. Describe chores and tasks your child does at home.
  
  
  
  
  
  
  
  
  
  
5. How does your child interact with other children? Please explain and consider whether or not your child shares, takes turns, and cooperates with peers?
  
  
  
  
  
  
  
  
  
  
6. What do you see as possible advantages and disadvantages of entering kindergarten a year early?

Advantages:

Disadvantages:

**For Office Use Only:** Date Received \_\_\_\_\_ Initials of Receiver \_\_\_\_\_ Date of Appointment \_\_\_\_\_