

Barren County Schools Parent Information and Application for Early Entrance to Kindergarten

Please complete this application if:

1. Your child will turn five (5) years old between **August 2nd and September 30th** and you are requesting early admission to kindergarten in the Barren County Public Schools, pursuant KRS 158.030.
2. You believe your child demonstrates academic achievement, social, emotional and physical maturity appropriate for kindergarten placement.

The submission of this application serves as the petition for your child to be considered for early placement in kindergarten. **The completed application may be submitted to your child's school OR directly to the following:**

Office of the Director of Instruction
Barren County Board of Education
202 West Washington Street
Glasgow, KY 42141

For more information, contact the school counselor or the Barren County Director of Elementary Instruction at 270-651-3787.



Contents

Page 1-2	Overview of Information – parents keep
Page 3-6	Forms for parent to complete and return
Page 7-8	Form completed by prior educational provider
Page 9-10	Forms for school or district to complete

==PARENTS KEEP THIS INFORMATION==

Overview

Senate Bill 24 (SB 24), amended KRS 158.030 to say that beginning with the 2017-2018 school year, any child who is five (5) years of age, or who may become five (5) years of age by August 1, may enter a primary school program. This changed the long-standing October 1 entry eligibility requirement that was formerly in place.

To be recommended for early entrance to kindergarten, children will need to demonstrate above-average performance and development in academic skills as well as approaches to learning, health and physical well-being, language and communication development, social and emotional development, and cognitive and general knowledge. The standards for early admittance are very high to ensure that students are not frustrated by their advanced grade placement. There will be no consideration for children with birthdates outside of the Aug 2 to September 30 window. Additionally, final placement considerations will include availability of space and funding.

The process will include multiple measures of the child's readiness for school. These measures will include, but are not limited to the following:

- Parent observation and input (Parent Questionnaire)
- Data from prior settings, such as childcare, state-funded preschool, Head Start and other early learning settings (Early Settings Information); this form may be duplicated and completed by multiple prior early settings providers
- Brigance Kindergarten Readiness Screener including Parent Social/Emotional Self-Help
- Other exams that may include STAR Early Literacy, STAR Math, or District Common Assessments

Your child will be evaluated by qualified school personnel. Upon completion of all assessments, all data collected will be reviewed. Parent(s) or guardian(s) will be notified in writing as to the decision for early entrance trial period no later than July 15.

Timeline for the Process

- March 15 – May 1 Completed Application Packet Submitted
- May 1 – June 30 Assessments Scheduled & Administered
- By July 15 Parents Notified of Response to Petition

There are two possible outcomes of individual testing:

- The student did not demonstrate the needed readiness skills and is not eligible for early entrance into kindergarten, or:
- The student did demonstrate the needed readiness skills and is eligible for early entrance into kindergarten. Families of students found eligible must complete the regular registration process through their home school to enroll the student into a kindergarten program for the upcoming year
 - Enrollment items that the school will require copies of:
 - Certified Birth Certificate
 - Kentucky Immunization Certificate
 - Kentucky Eye Exam by an ophthalmologist or optometrist
 - Recent Health Physical Examination
 - Recent Dental Screening or Examination
 - Student's Social Security Card (optional)

BC 09.121 AP.21

Child's Name _____ Birthdate ____/____/____
 Last First MI

Child's First Language _____ Gender: Female Male

Home Phone _____ Cell _____ Work _____

Because my child will not turn five (5) years old before August 1, I am requesting early admission to kindergarten in the Barren County Public Schools, pursuant KRS 158.030.

_____ Upon entry into the kindergarten program, my child will be screened using the Kentucky Kindergarten Readiness Screener, the Brigance. Those screening results will be used to plan my child's academic program, and they will be shared with me along with the kindergarten teacher's interpretation of what the screening data means in regard to my child's anticipated kindergarten success. I will be required to complete a social/emotional inventory as a part of this screening.

_____ My child will be provided the same rigorous kindergarten program and supports as all other students attending kindergarten in the Barren County Schools. This includes curriculum content and instruction, assessment, daily schedule and behavioral expectations.

_____ My child's progress and performance will be measured using the Kentucky Core Academic Standards as a guide, with attention to those standards specific to kindergarten.

____. My child will be not be promoted and/or retained as a part of his/her public school experience because of his chronological age/birthdate.

_____ I may rescind my request for early entry to kindergarten and withdraw my child from kindergarten by providing the school principal with this written request.

Date _____

===RETURN THIS FORM TO SCHOOL===

Early Learning Experience - List all preschools (public and private), Head Start, childcares, therapy services and/or other early learning experiences in which your child has participated.

Name of School/Program	Teacher's Name	Dates of Attendance	#Hours/Week
_____	_____	_____ - _____	_____
_____	_____	_____ - _____	_____
_____	_____	_____ - _____	_____

Parent Questionnaire - Please answer each question below. If more space is needed, attach additional paper.

1. Why do you believe your child should be considered for early entrance to kindergarten?
2. What responsibilities does your child have at home? What types of prompting is required for your child to fulfill those responsibilities?
3. How does your child respond when he/she tries something that is new and challenging? How does your child respond when not successful?
4. How long does your child maintain interest in an activity of their choosing?
In an activity of your choosing?
5. Are there any health concerns or issues for your child (allergies, medications, etc.)?
6. What kinds of experiences has your child had with writing tools such as crayons, pencils and markers?
With scissors?
7. How many of the following can your child identify and/or recognize?.
 1. Letters?
 2. Numbers?
 3. Shapes?
8. How does your child respond to change?
9. On a scale of 1 – 10 how would you rate your child's ability to do things for her/himself? Why did you choose that rating?
10. Describe your child as your child works/plays with other children.

Parent Report—Self-help and Social-Emotional Scales

Child's Name _____ Child's Date of Birth _____ Today's Date _____
 Parent's/Caregiver's Name _____ Teacher's Name _____

Directions: Read each item and circle the response or description that best reflects your child's behavior or skill level.

SELF-HELP SKILLS					
A. Eating Skills					
1.	Does your child use a spoon?				
	If yes, does your child place the spoon in his/her mouth without turning the spoon upside down, with little or no spilling of food?				
	Rarely/No	Sometimes	Most of the time		
2.	Does your child use the side of the fork for cutting soft food, such as a piece of baked potato or a piece of cake?				
	Rarely/No	Sometimes	Most of the time		
3.	Does your child hold a fork in his/her fingers, not in his/her fist?				
	Rarely/No	Sometimes	Most of the time		
B. Dressing Skills					
4.	Does your child put on his/her shoes?				
	Criteria: Buckling, tying, or Velcro® fastening is not required for credit.				
	No	Yes (sometimes on wrong feet)	Yes (each shoe on correct foot 90% of the time)		
5.	Does your child dress himself/herself unsupervised?				
	Rarely/No	Sometimes	Most of the time, except for help with difficult fasteners		
	Yes (completely dresses himself/herself, putting all clothes on correctly and fastening all fasteners)		Yes (completely dresses himself/herself, including tying shoelaces and fastening all fasteners)		
6.	Does your child put on his/her socks?				
	Rarely/No	Sometimes	Most of the time		
C. Toileting Skills					
7.	Does your child get on the toilet or potty by himself/herself (even if he/she needs help with clothing)?				
	Rarely/No	Sometimes	Most of the time		
8.	Does your child have bowel movements ("poop") in the toilet or potty (no more than one accident a week)?				
	Rarely/No	Sometimes	Most of the time		
9.	Does your child urinate ("pee") in the toilet or potty (no more than one accident a week)?				
	Rarely/No	Sometimes	Most of the time		
10.	Does your child attempt to wipe himself/herself after toileting?				
	Rarely/No	Sometimes	Most of the time		
	OR				
	Does your child wipe himself/herself independently after toileting?				
	Rarely/No	Sometimes	Most of the time		
11.	Does your child take care of his/her toileting needs?				
	Rarely/No	Sometimes	Most of the time		
	Rarely/No	Sometimes	Yes (flushing the toilet most of the time after using it)	Yes (flushing the toilet and washing and drying his/her hands most of the time)	
12.	Does your child go to the bathroom on his/her own without being asked or reminded?				
	Rarely/No	Sometimes	Most of the time		

== RETURN THIS FORM TO SCHOOL ==

To be completed by prior child care provider

Barren County Public Schools
Early Settings Information
(Daycare, Private Sitter, Preschool, etc.)

Role or Position	Signature

M – Mastered – This child demonstrates this skill with accuracy more than 80% of times attempted.

Is able to separate from parents, demonstrating security	N	E	M
Demonstrates independent personal care skills (toileting, dressing, feeding)	N	E	M
Follows daily classroom routine without prompt	N	E	M
Transitions from one activity to another without resistance or prompt	N	E	M
Adheres to classroom and outdoor rules with little prompt	N	E	M
Works independently	N	E	M
Is eager to try new things	N	E	M
Is persistent when faced with adversity	N	E	M
Works until a task is completed	N	E	M
Shows pride in efforts and completed tasks	N	E	M
Demonstrates curiosity and a willingness to explore	N	E	M
Works or plays cooperatively with peers	N	E	M
Demonstrates responsibility by caring for materials and the classroom environment	N	E	M
Understands and follows two-step directions	N	E	M
Is able to attend to a group book reading	N	E	M
Speaks in complete sentences	N	E	M
Participates in turn taking as a part of conversation for at least three exchanges	N	E	M
Is able to retell a story with events in correct sequential order.	N	E	M
Demonstrates understanding of positional words (up, in, near, under, over, behind)	N	E	M
Demonstrates understanding of time (before, after, tomorrow, yesterday)	N	E	M
Demonstrates understanding of sequence (first, next, then)	N	E	M
Recognizes all upper case letters of the alphabet	N	E	M
Distinguishes between printed letter and numeral	N	E	M
Identifies the beginning sound of simple words	N	E	M
Provides two rhyming words when offered a simple word such as “hat”	N	E	M
Writes first name with letters in correct order	N	E	M

===RETURN THIS FORM TO SCHOOL===

Is able to use scissors with control and intentionality	N	E	M
Classifies objects by shape, size or color and can describe rationale for classification	N	E	M
Recognizes and can continue simple patterns	N	E	M
Counts to at least 30 (rote count)	N	E	M
Counts at least 10 objects (meaningfully count)	N	E	M
Matches correct number of objects to written numerals 1-5	N	E	M
Distinguishes which group of objects has more and which group has less	N	E	M
Recognizes first and last name in print	N	E	M
Demonstrates knowledge of front and back of book	N	E	M
Turns pages in a book, one at a time	N	E	M
Understands the difference between text and picture	N	E	M
Demonstrates understanding of reading left to right and top to bottom	N	E	M
Reacts to conflict by using words to problem solve	N	E	M
Seeks to calm self when angry or frustrated	N	E	M

What strengths does this child demonstrate that would facilitate success upon early entry into the kindergarten setting?

What supports might this child need to be successful upon early entry into the kindergarten setting?

Other comments or concerns regarding this child's early entry into the kindergarten setting?

===RETURN THIS FORM TO SCHOOL===

===FOR DISTRICT USE ONLY===

Early Entrance to Kindergarten Data Collection and Reporting

Child's Name _____ School _____

Required Application Documentation

_____ Application	Date Received _____
_____ Parent Questionnaire & Early Settings Information	Date Received _____

Initial Data Collection

Brigance Screening Score _____ Date Screened _____
Minimum Expectation: 85

Initial Data Review, Discussion and Recommendation: _____

Additional Assessment Data Recommended: ☐ Yes ☐ No

STAR Early Literacy Score _____ Date Administered _____
Minimum Expectation: 700 – Given ONLY if a score of 85 is achieved on the
Brigance Kindergarten Readiness Screener

Additional Test Score _____ Date Administered _____
Minimum Expectation: ____% - Given ONLY if a score of 85 is achieved on the
Brigance Kindergarten Readiness Screener

Additional Data Review, Discussion and Recommendation: _____

_____ Child is eligible for Early Entry to K. _____ Child is NOT eligible for Early Entry to K.

Signatures and Titles of Participants (Principal, Guidance Counselor, Teacher, etc.)

Signature Title

Signature Title

Signature Title

Signature Title

===RETURN THIS FORM TO SCHOOL===

===FOR DISTRICT USE ONLY===
BC 09.121 AP.21

Date Received in Central Office _____

Date of Screening _____

Requested school at or over cap size? ☐ Yes ☐ No

Child met Kindergarten Readiness Standards on district-approved screener? ☐ Yes ☐ No

Kindergarten Readiness Level _____

Comments: _____

PETITION FOR EARLY ENROLLMENT

☐ Recommended ☐ Not Recommended

Director of Instruction's Signature

Date

PETITION FOR EARLY ENROLLMENT

☐ Recommended ☐ Not Recommended

Director of Pupil Personnel's Signature

Date