



Kindergarten Teacher Recommendation

DIEGUEÑO COUNTRY SCHOOL · ADMISSIONS · CONFIDENTIAL

PART 1 · TO BE COMPLETED BY THE PARENT / GUARDIAN

Parent / Guardian Authorization

As part of the admissions process, we request an assessment of the applicant from their current teacher, together with any progress reports on file at the school. Please complete and sign this section, then give this form to your child's preschool teacher. The teacher will complete the recommendation and return it directly to Diegueño Country School by mail, email, or fax.

STUDENT NAME (PRINT)

Our signatures below indicate that we understand this confidential recommendation is a required and important part of our child's admission application, and that we will not have access to it.

PARENT / GUARDIAN 1 NAME (PRINT)	SIGNATURE	DATE
PARENT / GUARDIAN 2 NAME (PRINT)	SIGNATURE	DATE

PART 2 · TO BE COMPLETED BY THE PRESCHOOL TEACHER

Teacher Information

The student named above is applying for admission to Diegueño Country School. We would greatly appreciate your taking the time to evaluate this student's kindergarten readiness. Your observations will be held in the strictest confidence and do not become part of the student's permanent record. Please return the completed form, along with copies of the student's progress reports, directly to the Admissions Office as soon as possible. Thank you for your assistance.

Return by Mail	Or by Email / Fax
Diegueño Country School, Attn: Sushma Patel P.O. Box 8126, Rancho Santa Fe, CA 92067	Email: sushma@diegueno.com Fax: (858) 759-9602

PRESCHOOL		SCHOOL FAX
PERSON COMPLETING THIS FORM	TITLE	EMAIL

How Long Have You Known This Child?	Enrolled at Your School From	To
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Social & Emotional Development

Skill	Exceeds Expectations	Age Appropriate	Needs Development	Area of Concern
Listens	☐	☐	☐	☐
Cooperates	☐	☐	☐	☐
Functions independently	☐	☐	☐	☐
Uses words to express thoughts and feelings	☐	☐	☐	☐
Follows directions	☐	☐	☐	☐
Demonstrates self-control	☐	☐	☐	☐
Adjusts to transitions	☐	☐	☐	☐
Attention span for self-chosen activity	☐	☐	☐	☐
Attention span for assigned activity	☐	☐	☐	☐
Interacts well with peers	☐	☐	☐	☐

Please comment on the student's social and emotional development:

Academic Development

Skill	Exceeds Expectations	Age Appropriate	Needs Development	Area of Concern
Knows lower-case letter names	☐	☐	☐	☐
Knows upper-case letter names	☐	☐	☐	☐
Knows lower-case letter sounds	☐	☐	☐	☐
Knows upper-case letter sounds	☐	☐	☐	☐
Can read simple words	☐	☐	☐	☐
Already a reader	☐	☐	☐	☐
Recognizes numbers to 10	☐	☐	☐	☐

Please comment on the student's academic development:

Physical Development

Skill	Exceeds Expectations	Age Appropriate	Needs Development	Area of Concern
Demonstrates age-appropriate fine motor skills	☐	☐	☐	☐
Demonstrates age-appropriate gross motor skills	☐	☐	☐	☐
Displays basic movement skills (e.g., hopping)	☐	☐	☐	☐
Writes name	☐	☐	☐	☐
Uses an appropriate pencil grip	☐	☐	☐	☐

Please comment on the student's physical development:

Cognitive Development

Skill	Exceeds Expectations	Age Appropriate	Needs Development	Area of Concern
Expresses ideas well orally	☐	☐	☐	☐
Articulates thoughts clearly	☐	☐	☐	☐
Sustains attention in small groups	☐	☐	☐	☐
Sustains attention in large groups	☐	☐	☐	☐
Grasps new concepts	☐	☐	☐	☐
Demonstrates an interest in learning	☐	☐	☐	☐
Understands basic mathematical concepts	☐	☐	☐	☐

Please comment on the student's cognitive development:

Specific Learning Needs

Has this student been evaluated for, or does the student currently receive, support services (e.g., speech therapy, occupational therapy, or educational support)? ☐ Yes ☐ No

If yes, please specify the type of support or services:

Would you recommend this student be evaluated for support services? ☐ Yes ☐ No

If yes, please specify the type of support or services:

Has testing been recommended but declined by the parents? ☐ Yes ☐ No

If yes, please explain:

Family Information

Parent / Guardian	Always	Sometimes	Rarely
Communicates openly with the school	☐	☐	☐
Follows the rules and policies of the school	☐	☐	☐
Has realistic expectations for the child	☐	☐	☐

How would you describe the parents' degree of commitment to and participation in your school?

Descriptors

Please check the words that best describe this applicant:

- | | | | | |
|-------------------------------------|-------------------------------------|--|---------------------------------------|-------------------------------------|
| ☐ Aggressive | ☐ Polite | ☐ Easily frustrated | ☐ Independent | ☐ Respectful |
| ☐ Articulate | ☐ Curious | ☐ Flexible | ☐ Inquisitive | ☐ Helpful |
| ☐ Cheerful | ☐ Well-liked | ☐ Good-natured | ☐ Oppositional | ☐ Detached |
| ☐ Confident | ☐ Determined | ☐ Impulsive | ☐ Shy | ☐ Spirited |

Please add any additional information that would provide a more complete picture of the student and family:

Overall Recommendation

This applicant is:

- ☐ Strongly Recommended ☐ Recommended ☐ Recommended with Reservation ☐ Not Recommended

Teacher Signature

Date