ISAAGNY Form Instruction Sheet

We greatly appreciate your taking the time to complete this form, as it provides an additional way of getting to know the student. We will review your input with the understanding that students are constantly changing and developing.

As you complete the form, please consider:

- We're looking for a candid assessment of the student's ongoing development, strengths, and areas with room for improvement.
- Your assessment should be based on who they are in your class this year. If you cannot speak to the student's current performance or are not currently teaching the student, you are likely not the appropriate person to be completing the form (the exception is those filling out the General Recommendation form for Middle/Upper School applicants).
- Please keep in mind the student's relative age within their class cohort.
- If you are unsure of the answer to a question, please indicate that and add more notes at the end of the section.
- The comment boxes are very helpful to admission offices. We would appreciate 3-4 sentences in each comment box, including specific examples.

CONFIDENTIALITY:

Preparers and recipients are expected to maintain the information in strict confidence. Preparers and recipients are prohibited from sharing this information with parents/guardians/students, and ISAAGNY does not provide this information to parents/guardians/students unless required by subpoena or court order.

HOW AND WHEN TO SUBMIT:

- All completed forms should be sent directly to the school(s) to which each student is applying. We suggest you do not submit prior to November 1, so that you have time to get to know the student before completing this form.
- You may receive multiple requests to complete this form, as each ISAAGNY school has its own application process and software.
- Do not send completed forms to ISAAGNY, as we do not process or forward paperwork.
- We recommend saving a copy of the completed forms, just in case of technological glitches.

Please note: *Text fields have limited character space, and your text responses should fit within the space provided. Copied and pasted text extending beyond the text box will require editing to fit within the text field provided.*

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CONFIDENTIAL Form for Applicants to 3 Year Old Groups
2026-27

We greatly appreciate your taking the time to complete this form. It provides one way of getting to know the student and is reviewed with the understanding that students are constantly changing and developing. Our intention is to establish a dynamic understanding of the student, and your observations and descriptions are essential in this process. Preparers and recipients are expected to maintain the information in strict confidence and to refrain from sharing it with students, parents, or guardians.

Child's Name: _____ Name usually called: _____

Birthdate: _____ Current School: _____

Current School Address:

_____

Current School Phone: _____ Date child entered school: _____

Current Teacher: _____ Date of this report: _____

Please describe the philosophy of the early childhood program the applicant is currently enrolled (if applicable).

_____

Please describe the emphasis of your program (i.e. play-based, traditional, etc):

_____

Name, Email and Phone of person completing this report:

_____

How long have you known this student? _____

How much time per week is this student in your class? _____

Student's primary language: _____ Language(s) spoken at home: _____

List six adjectives to describe this student:

_____ _____

_____ _____

_____ _____

How many students are in applicant's class? _____ How many teachers are in applicant's class? _____

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PHYSICAL DEVELOPMENT					
ISAAGNY	Area of Concern	Progressing Towards Age Appropriate	Age Appropriate	Area of Strength	N/A
Gross Motor					
Participates in indoor/ outdoor activities navigating body and space appropriately					
Core Strength					
Walks/Jumps/Runs with control and regulation					
Stair climbing, alternating feet					
Balance					
Individually sits for appropriate time					
Sits for appropriate time in a group setting					
Fine Motor					
Participates in small motor activities					
Readily works with a variety of sensory materials (i.e. playdoh, clay, water, sand)					
Tinkers with a variety of manipulatives					
Solves puzzles of varying difficulty					
Builds structures with blocks					
Squeezes, pushes, pulls, and twists in age-appropriate manner					
Crosses midline					
Brings both hands together					
Has tripod grasp					
Hand strength/dexterity					

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PHYSICAL DEVELOPMENT (cont.)					
ISAAGNY	Area of Concern	Progressing Towards Age Appropriate	Age Appropriate	Area of Strength	N/A
Self-Care					
Manages routines involving belongings					
Cares for classroom materials					
Appropriately participates in clean up routines					
Washing hands					
Drinking from a cup					
Toileting					

PHYSICAL DEVELOPMENT COMMENTS:

Describe applicant's gross motor skills further. Are there particular activities the child enjoys or doesn't enjoy?

Describe applicant's profile of self-regulation and energy level.

Describe applicant's fine motor skills further. Are there particular activities the child enjoys or doesn't enjoy?

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SOCIAL/EMOTIONAL DEVELOPMENT					
ISAAGNY	Area of Concern	Progressing Towards Age Appropriate	Age Appropriate	Area of Strength	N/A
Emotional Regulation					
Displays confidence					
Accepts limits and boundaries					
Demonstrates appropriate emotional regulation					
Shows an understanding of emotions					
Displays frustration tolerance					
Finds ways to self-soothe					
Peer to Peer					
Engages with peers appropriately					
Responds accordingly to other's emotions					
Engages in cooperative play					
Takes turns with prompts					
Takes turns without prompts					
Classroom Routines					
Separates from parents/caregiver					
Engages with adults appropriately					
Appreciates humor and appropriate levels of silliness					
Displays a cooperative attitude					
Transitions easily					
Flexibly manages new events and changes to schedule					
Takes turns with prompts					
Takes turns without prompts					

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Briefly comment on any other aspects of the applicant's social and emotional skills not noted in the checklist or that you would like to elaborate on from the checklist. (1100 characters)

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LANGUAGE/LITERACY SKILLS					
ISAAGNY	Area of Concern	Progressing Towards Age Appropriate	Age Appropriate	Area of Strength	N/A
Receptive Language					
Responds to name					
Follows directions given individually					
Follows directions given in a group					
Follows along to stories read aloud					
Expressive Language					
Responds to simple questions					
Recalls names of peers and educators					
Uses language to identify items in the classroom					
Uses language to engage in play					

Briefly comment on any other aspects of the applicant's language and literacy skills not noted in the checklist or that you would like to elaborate on from the checklist. (1100 characters)

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EMERGENT LITERACY/MATH SKILLS					
ISAAGNY	Area of Concern	Progressing Towards Age Appropriate	Age Appropriate	Area of Strength	N/A
Emergent Literacy					
Handles, browses, looks over books					
Retells stories in sequence read 1:1 or in group					
Recognizes rhyming words					
Recognizes name in writing					
Emergent Math					
Sorts objects into categories					
Understands directionality like over, under, in front of, behind, etc.					
Names basic shapes like triangle, circle, and square					
Orally counts to 5 in sequence					
Orally counts beyond 5 in sequence					
Demonstrates 1:1 correspondence					
Recognizes patterns					
Recognizes numerals 1 through 5					
Recognizes numbers beyond the number 5					

Briefly comment on any other aspects of this child's literacy and emergent math skills not noted in the checklist or that you would like to elaborate on from the checklist. (1100 characters)

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CONCLUSION

Describe this applicant's strengths, and describe an area you are working on with this child. (1100 characters)

FAMILY

Is there anything significant about the applicant or the applicant's home life to note? (new baby, move, divorce/separation, general health)

Have all financial obligations been met in a timely way? Yes No

Have you received active cooperation from the family? Yes No

Does the family follow through on the school's guidance when applicable? Yes No

Have the parents maintained an appropriate level of communication with the school? Yes No

To your knowledge, is the parent's perception of the child compatible with the school's understanding of the child? Yes No

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FAMILY (cont.)

Please describe parents' involvement with the school (attended parent/teacher conferences, family events, etc.) (1100 characters)

Best number to call should the Admissions Office(s) have questions: _____

Director's Signature: _____ Date: _____

Clear Form Print

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