

Child's Name \_\_\_\_\_

Preschool \_\_\_\_\_ Date of Birth \_\_\_\_\_

Teacher \_\_\_\_\_ Dates Attended \_\_\_\_\_

The information provided will assist in planning each child's educational program.

## Fine Motor Skills

		Independent	With Help	N/A
1.	Holds pencil/crayon with fingers (not fist)			
2.	Cut out with scissors			
3.	Can draw a person			
4.	Zips and buttons			
5.	Ties shoes and laces			
Comments:				

## Social/Emotional Development

		Independent	With Help	N/A
1.	Works and plays well with others			
2.	Follows classroom rules			
3.	Displays self-control			
4.	Participates in group activities			
5.	Cooperative			
6.	Adjust to new situations			
7.	Separates from parents without distress			
8.	Shows self-confidence			
Comments:				