

PRESCHOOL ASSESSMENTS

Name:

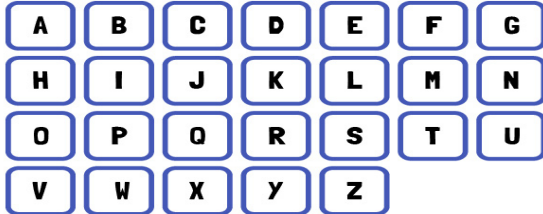
Date:

I can say my name and age:

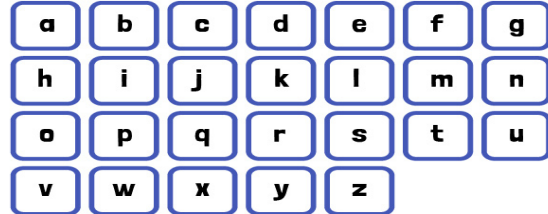
I can say my address:

I can say my phone number:

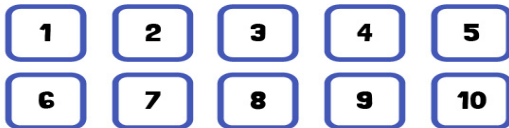
I can recognize these letters:



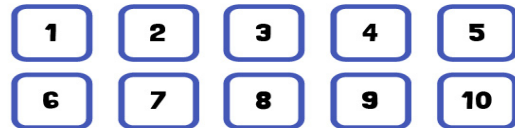
I can recognize these letters:



I can count these numbers:



I can count these numbers:



I can say these shapes:



I can say these colors:

