

Make entering kindergarten successful for your child

By completing this two-page form, your child-student will have the best possible start on the first day of school:

- 1 Your child-student will be recognized on the first day of school by teachers and other school staff
- 2 Teachers will know about your child's likes, dislikes, allergies (or other health needs), learning styles and skills
- 3 Creates a great start for your child-student and will make it much easier for their teacher to help them in the classroom
- 4 Increases communication between you and your child's teacher

School Locations:

BATTLE GROUND

Lisa Hipolito

Hipolito.lisa@battlegroundps.org

PO Box 200

Battle Ground, WA 98604-0200

CAMAS

Diane Loghry

Diane.loghry@camas.wednet.edu

1954 NE Garfield

Camas, WA 98607

EVERGREEN

Gaelynn Mills

Gaelynn.mills@evergreenps.org

PO Box 8910 / 13501 NE 28th Street

Vancouver, WA 98668

GREEN MOUNTAIN

Kimberly Combs

Kim.combs@greenmountainschool.us

13105 NE Grinnell Rd

Woodland, WA 98674

HOCKINSON

Colleen Anders

Colleen.anders@hock.k12.wa.us

20000 NE 164th St.

Brush Prairie, WA 98606

LA CENTER

Bonnie Lock

bonnie.lock@lacenterschools.org

725 Highland Rd.

La Center, WA 98629

VANCOUVER

Chrissy Free

chrissy.free@vansd.org

2901 Falk Rd

Vancouver, WA 98661

WASHOUGAL

David Tudor

David.tudor@washougalsd.org

4855 Evergreen Way

Washougal, WA 98671

I'm going to Kindergarten. All about me!

Early registration by June 15. Complete prior to the beginning of school.



This form is designed to be completed by a parent or with the Child Care or Preschool provider and provides helpful information to the kindergarten teacher. Your child need not attend a formal early learning program; this form is intended for **all** entering kindergarten.

Person Completing Form / Relationship to child

Today's Date

CHILD'S NAME

DOB

MALE

FEMALE

PARENT/GUARDIAN (Last Name, First Name)

Language at Home

Siblings/Ages

I'm interested in preschool info.

Childcare or Preschool Provider (if attended, not required)

Dates Attended

From

To

Avg Days/Wk

Avg Hrs/Day

Elementary School that child will attend

Fall of (Year)

Is child on IEP? Yes NO

If yes, please request records from _____

Health Allergy Needs? Yes NO

If yes, please explain or attach document _____

About Me (Capture direct quotes from the child about starting school.)

What do you want your Kindergarten teacher to know about you and your family?

What are you looking forward to the most about Kindergarten?

What questions or wonderings do you have about Kindergarten?

About The Child (Capture comments from the parents.)

Please describe your hopes and dreams for your child as s/he begins Kindergarten.

Please describe any questions or concerns you may have about your child starting Kindergarten?

Please describe any recent significant changes in your family. (e.g. new sibling, moves, divorce, death, etc.)

About The Child's Learning And Development

What does the child enjoy doing?

What motivates the child?

How do you help the child manage new situations or challenges?

How do you comfort and engage the child?

About Me And My Family Culture

Please circle the letter that corresponds to the child's ability:

Not Yet / In Progress / **Usually**

- N In U Describes what he/she likes and is interested in.
- N In U Associates emotions with words and facial expressions (ex. crying means you're sad).
- N In U Anticipates consequences of own behavior (ex. if I do that, then this happens).
- N In U Stays with a task for more than five minutes and attempts to solve problems that arise.

Building Relationships

- N In U Plays with children the same age and of different ages.
- N In U Understands that adults may want the child to do something different than he/she wants to do
- N In U Cooperates with other children, shares and takes turns.
- N In U Asks for help from another child or an adult to solve a problem.

Communicating (Literacy)

- N In U Talks in sentences of five or six words.
- N In U Identifies three or more letters with their sound at the beginning of a word (such as "day", "dog", and "David" all begin with "D".)
- N In U Recognizes own name in print.
- N In U Begins to print or copy own name, and identifies at least some of the letters.

Learning About My World

- N In U Asks adults questions to get information (as appropriate in the family's culture.)
- N In U Understands the ideas of "same" and "different"
- N In U Compares two objects using comparison words such as smaller, faster, and heavier.
- N In U Follows simple directions for position (beside, next to, between, etc.).

Permission To Share Information:

I _____ give my permission for _____
(parent/guardian name) (child care or preschool name)

to provide: _____ with a copy of this form for the purposes
(Elementary school name)

of Kindergarten transition planning. Further, if my child does not attend the above mentioned school or district, I give permission for that district to share the Kindergarten Transition Summary Form with the other districts in Clark County to ensure this information follows my child to the local school (s)he will be attending.

Parent Signature

Completed Forms: When you have completed this form, return it to your child's new school. If your school is on summer break, mail your completed form to one of the locations listed on the first page.