

Parent Survey for Upcoming Kindergarteners

Child's Name _____ Parent Name _____

Please answer the following questions to the best of your ability.

Phonological Awareness and Print	YES	NO	Not Sure
Points to, recognizes and can tell you the letters in their name			
Writes name using an initial capital letter & lower case letters			
Reads or is read to frequently at home			
Demonstrates book awareness (front/back cover, reads from left to right and top to bottom)			
Identifies 2 words that rhyme			
Matches 15 letters with the sounds they make			
Uses symbols, letters, or drawings to express ideas			
Is able to hold a pencil correctly			
Can write/copy simple figures (straight line, circle, X, etc.)			
Can use child sized scissors with control			
Recognizes uppercase letters			
Recognizes lowercase letters			
Writes uppercase letters			
Writes lowercase letters			
Can read sight words	0-2 words	3-9 words	10+ words
Reads simple sentences with familiar text			
Reads short books with familiar text			

Mathematics	YES	NO	Not Sure
Counts number of objects in small groups (up to 10)			
Matches a numeral (0-10) to a group with that number			
Identifies all shapes (circle, triangle, hexagon, trapezoid, square, rectangle, oval)			
My child can count to _____ without help?			
Understands concept of more and less (up to 10 objects)			

Social/Emotional	YES	NO	Not Sure
Knows first and last name			
Knows parents' first and last name			
Knows age			
Makes needs known			
Interacts with other children			
Demonstrates independence in personal care (hand washing, dressing, bathroom use)			
Separates from parents by appearing comfortable and secure without parent			
Handles their emotions appropriately (anger, mad, sad, happy)			

List 5 words that best describes your child: _____

How do you motivate your child? _____

What are your child's interests? _____

What do you view as your child's strengths? _____

What do you view as your child's weaknesses? _____
