



SAINT PATRICK SCHOOL

Faith Education Community Service

907 Seventh Street, Rodeo, CA 94572

(510)799-2506 Fax: (510)867-2888

www.stpatrickschoolrodeo.org

St. Patrick School Kindergarten Readiness Questionnaire

(Required for acceptance into Kindergarten)

To be completed by parents:

Student's First Name

Student's Last Name

Date of Birth

Address

City

Zip

Home Phone or Cell

Primary Language Spoken at Home

Name of Preschool: _____

Address: _____

Preschool Director: _____

Preschool Teacher: _____

I give my permission for the preschool to fill out the information below regarding my child.

Parent Signature

Date

Kindergarten Readiness Questionnaire

Thank you for your time and assistance in completing this form. Please mail or fax this form back to St. Patrick School at your earliest convenience.

Please check mark below the appropriate column regarding student development.

Key: **G** (Good) **S** (Satisfactory) **N** (Needs Improvement)

(G) **(S)** **(N)**

___	___	___	Follows and complies with teacher's oral instructions
___	___	___	Works cooperatively with teacher
___	___	___	Works cooperatively with peers
___	___	___	Expresses himself/herself with age appropriate language
___	___	___	Enunciate words clearly
___	___	___	Stays on task—cut & paste – coloring - tracing
___	___	___	Cuts on straight line
___	___	___	Uses a glue stick for pasting
___	___	___	Arrives to school on time
___	___	___	Is able to transition between activities with ease
___	___	___	Separates well from parent(s) in the morning
___	___	___	Is prepared for school activities in the morning
___	___	___	Is enthusiastic about learning
___	___	___	Likes to participate in group activities
___	___	___	Has a good appetite

How long has this student been attending preschool at this location? _____

How many days per week does this student attend? _____

How many hours does this student attend? _____

Other Comments or Observations:

The above information is true to the best of my knowledge...

Teacher/Director Name: _____

Signature: _____ **Date:** _____

Fax to St. Patrick School: 510-867-2888

Mail to St. Patrick School: 907 Seventh Street Rodeo, CA 94572