

Sacramento City Unified School District  
CHILD DEVELOPMENT DEPARTMENT

## Overview of Child's Performance in General Education Preschool

Child's Name \_\_\_\_\_ Site \_\_\_\_\_ Preschool Teacher \_\_\_\_\_ Date \_\_\_\_\_

Date	Preschool Screenings	Results	
	General Development (excluding Communication)	^ Passed	^ Referred to Child Development Support Staff
	Communication Speech/Language	^ Passed	^ Referred to School Site Speech Therapist
	Social/Emotional	^ Passed	^ Referred to Case Management

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# Information regarding the Preschool child's abilities:

## Alphabet knowledge

Knows letters of the alphabet: Uppercase \_\_\_\_ of 26 lowercase \_\_\_\_ of 26

Knows letter sounds Notes: \_\_\_\_\_

Recognizes: First Name Last Name Notes: \_\_\_\_\_

Writes: First Name Last Name Notes: \_\_\_\_\_

Knows age

## Personal Skills

Names body parts Notes: \_\_\_\_\_

Able to feed self with spoon/fork Notes: \_\_\_\_\_

Able to drink from a cup Notes: \_\_\_\_\_

Able to dress self, do buttons/zippers Notes: \_\_\_\_\_

Able to use the toilet independently Notes: \_\_\_\_\_

## Number Skills

Rote Counts up to \_\_\_\_ Notes: \_\_\_\_\_

One to one Correspondence up to \_\_\_\_ objects Notes: \_\_\_\_\_

Recognizes Numbers Notes: \_\_\_\_\_

## Social Skills

Able to have conversations with others Notes: \_\_\_\_\_

Able to speak in 3 word sentences Notes: \_\_\_\_\_

Shares joy/affect with others Notes: \_\_\_\_\_

Able to answer questions (who what where,etc) Notes: \_\_\_\_\_

Participates in organized play with others Notes: \_\_\_\_\_

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## Colors/Objects

Recognizes colors Notes: \_\_\_\_\_

Matches colors Notes: \_\_\_\_\_

Matches/sorts objects Notes: \_\_\_\_\_

Knows size/position/directions (ie; up and down) Notes: \_\_\_\_\_

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