



PRESCHOOL EVALUATION FORM

Confidential

Please send directly to: Adat Ari El Day School 12020 Burbank Blvd Valley Village, CA 91607 818-766-4992 818-766-1436 (fax)

Name of Student

School

Address

City State Zip

Telephone Date

Part 1: Social/Emotional Development Read each item below carefully. Circle the number that indicates the frequency of occurrence *within the last two weeks* for this child. Please answer every item. If you are uncertain about any item, give your best estimate or mark it N/A. Different colored ink could be used for subsequent reviews throughout the year.

	Almost Never	Once in a While	Moderately Often	Most of the Time	Almost Always		Almost Never	Once in a While	Moderately Often	Most of the Time	Almost Always
1. Works/plays well alone	1	2	3	4	5	15. Has poor self-control	1	2	3	4	5
2. Accepts when things do not go his or her way	1	2	3	4	5	16. Appears sad	1	2	3	4	5
3. Difficulty sustaining attention	1	2	3	4	5	17. Counts to 20 when asked	1	2	3	4	5
4. Disruptive during class	1	2	3	4	5	18. Follows rules/limits	1	2	3	4	5
5. Expresses self freely	1	2	3	4	5	19. Offers to assist other children	1	2	3	4	5
6. Completes projects/assignments	1	2	3	4	5	20. Works/plays well without adult support	1	2	3	4	5
7. Friendly towards peers	1	2	3	4	5	21. Works/plays well with others	1	2	3	4	5
8. Difficulty following directions	1	2	3	4	5	22. Seeks attention from peers or teachers	1	2	3	4	5
9. Easily soothed when upset	1	2	3	4	5	23. Acts shy	1	2	3	4	5
10. Names all letters of the alphabet when asked	1	2	3	4	5	24. Knows parts of a book when asked (cover, title, where story starts, etc.)	1	2	3	4	5
11. Ignores teasing	1	2	3	4	5	25. Handles disappointment well	1	2	3	4	5
12. Participates in class	1	2	3	4	5	26. Quickly joins group activities	1	2	3	4	5
13. Functions well with distractions	1	2	3	4	5	27. Follows classroom routines	1	2	3	4	5
14. Makes friends easily	1	2	3	4	5	28. Well-liked by classmates	1	2	3	4	5

Part 2: Classroom Activities Please circle a number to indicate how often *within the last two weeks* the child selected the following activities in the classroom.

	<i>Almost Never</i>	<i>Once in a While</i>	<i>Moderately Often</i>	<i>Most of the Time</i>	<i>Almost Always</i>	<i>Not Applicable</i>		<i>Almost Never</i>	<i>Once in a While</i>	<i>Moderately Often</i>	<i>Most of the Time</i>	<i>Almost Always</i>	<i>Not Applicable</i>
29. Blocks	1	2	3	4	5	N/A	34. Water play	1	2	3	4	5	N/A
30. Literacy	1	2	3	4	5	N/A	35. Sand play	1	2	3	4	5	N/A
31. Dramatic Play	1	2	3	4	5	N/A	36. Other	1	2	3	4	5	N/A
32. Science	1	2	3	4	5	N/A	(Please specify: _____)						
33. Art	1	2	3	4	5	N/A							

37. With whom does the child prefer to play?

- Alone
 With one other child
 With a variety of other children
 With adults

38. Please indicate which of the following the child is able to do independently (select all that apply):

- Use the toilet
 Put toys away
 Bathe/shower
 Say "please" and "thank you"
- Get dressed
 Wash hands
 Count to 20
 Name all letters of the alphabet
- Zip or button coat
 Put on shoes
 Use silverware appropriately
 Identify parts of a book (cover, title, where story starts, etc.)

Part 3: Self-Expression Please circle a number to indicate how well the child expresses him or herself through the following means.

	<i>Not Well at all</i>	<i>Fairly Well</i>	<i>Well</i>	<i>Very Well</i>	<i>Extremely Well</i>		<i>Not Well at all</i>	<i>Fairly Well</i>	<i>Well</i>	<i>Very Well</i>	<i>Extremely Well</i>
39. Language	1	2	3	4	5	41. Movement	1	2	3	4	5
40. Art	1	2	3	4	5	42. Other	1	2	3	4	5
						(Please specify: _____)					

43. Is the GDO-R being administered to this child due to concern(s)? Yes No Don't Know

44. If yes, please indicate the nature of the concern (check all that apply).

- Parent-initiated
 Teacher-initiated
 Developmental
 Behavioral
- Academic
 Other: _____

45. Please use this space to provide any additional information that is pertinent to understand this child. _____
