

Hillside School

89 Hillside Avenue
Allendale, New Jersey 07401
(201) 327-2020

Anastasia P. Maroulis
Principal



Dear Parents/Guardians;

Please help us to get to know your child by completing the attached form and returning it when you register your child for Kindergarten. We appreciate your help and concern.

We look forward to our 2017- 2018 school year and know that your child will enjoy the Kindergarten Experience.

Thank you,

The Hillside School Kindergarten Teachers

Child's Name _____

Parent's Name _____

Date of Birth _____

Please check the following statements that best describe your child:

Social

_____ Separates from parents easily.

_____ Gets upset when leaving parent.

_____ Plays well with other children.

_____ Has difficulty sharing and taking turns.

_____ My child is more of a "leader" during playtime.

_____ My child is more of a "follower" during playtime.

_____ Easily transitions into new activities.

_____ Has trouble moving from one activity to another.

_____ I feel my child will easily adjust to kindergarten.

_____ I have some concerns regarding my child's readiness.

Comments _____

My child can:

_____ Identify colors

_____ Identify shapes

_____ Identify number 1-12 out of sequence

Identifies letters out of sequence

_____ Some

_____ All

Writes name

_____ In all uppercase letters

_____ Using upper and lowercase letters

What number can your child count up to? _____

Describe your child's reading readiness skills?

Did your child attend a preschool program? ____ Yes ____ No

Where did he/she attend? _____

How did your child adjust to the preschool experience? (Academic and Social)

Thank you for your time and patience in filling out this form.