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**Pre-school Report**

**Strictly confidential**

**Pupil’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Pupils’ address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of pre-school: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Pre-school address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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 **Pre-school phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Pre-school email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Principal/Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Pre-school skills**

1. **(a) How well does the child cope with the daily routine of pre-school?**

**(b) How well does the child cope with changes of routine in the day?**

1. **Please describe the child’s play skills**
2. **Please describe the child’s ability to listen to, enjoy and respond to stories, nursery rhymes, songs**
3. **Please comment on the child’s ability to make jigsaws, colour, thread beads etc.**
4. **(a) How would you describe the child’s fine motor skills?**

**(b) How would you describe the child’s gross motor skills?**

1. **Please describe the child’s concentration:**
	* **in group activities**
	* **in independent work**
	* **in adult-directed activities**
	* **in activities of the child’s own choice**
2. **Does the child separate easily from parents/guardians?**

**Speech & Language Skills**

1. **Please describe the child’s speech and language skills. If you can please comment on the child’s vocabulary, grammar pronunciation, ability to convey message successfully**
2. **Does the child understand what you say to him/her?**
3. **Does the child have difficulty remembering and/or following instructions?**
4. **Does the child stammer?**
5. **Does the child appear to be aware of his/her speech/language difficulties?**
6. **Does the child show any signs of anxiety and/or frustration when his/her efforts to communicate are not successful? Please describe**
7. **Is the child’s speech corrected in pre-school?**

**If ‘yes’, how does the child respond to correction?**

 **How does the child respond to correction in general?**

1. **Do the child’s speech & language difficulties affect his/her performance in pre-school?**
2. **Are classmates aware? Do they tease him/her about speech or any other matter?**
3. **Please describe the child’s conversational skills? Please comment on eye contact, turn-taking, staying on topic etc**
4. **Are the child’s speech & language skills improving or deteriorating?**

**Social & Emotional Development**

1. **Does the child socialise easily with:**
	* **Peers**
	* **Familiar adults**
	* **Unfamiliar adults**
2. **Please comment on the child’s confidence**
3. **Please comment on how the child functions in the playground**
4. **Please comment on the child’s behaviour**
5. **How does the child cope/perform in:**

**Very well Well With difficulty**

**(a) big group setting O O O**

**(b) small group setting O O O**

 **(c) one –to –one setting O O O**

1. **Please describe the child’s interests and abilities**

**School issues**

**1. Is attendance at pre-school regular?**

1. **Do parents/carers co-operate with the pre-school?**
2. **In your opinion, how suitable would placement in an average-sized Junior Infants class be for this child next September? (Please tick)**

**Very suitable Suitable Unsuitable Very unsuitable**

 **O O O O**

 **Why?**

1. **Please add any other information that you think may be relevant.**

***Thank you very much for your help***