



**Pre-Kindergarten/ Kindergarten Student Developmental Questionnaire**

(To be completed by parents of Pre-Kindergarten applicants. Please complete ALL information below. Any incomplete form will be returned.)

Name of child: \_\_\_\_\_ Date of birth: \_\_\_\_\_

First language \_\_\_\_\_ Other language(s) spoken \_\_\_\_\_

Previous school (if applicable): \_\_\_\_\_

Has your child ever: 1) been tested for a learning difference or disability?      No      Yes

2) received extra support for educational / emotional / behavioral difficulties?      No      Yes

	Not Yet	Occasionally with support	Consistently on one's own
Can take care of personal needs (e.g., personal hygiene, toilet training)			
Can separate from parents smoothly			
Has developed an age-appropriate attention span			
Can handle transitions well			
Cooperates with others in a group activity			
Shows respect for others' space and belongings			
Settles problems constructively (e.g., using words not physical actions)			
Able to understand and express him/herself in native language			
Uses English in conversation			
Demonstrates age-appropriate gross motor skills			
Demonstrates age-appropriate fine motor skills			

**Comments (Required):**

Please write extensive comments (e.g., type of previous school experience, length of days, strengths, areas of concern, likes, dislikes) and submit any other relevant details, which will help AES understand the applicant and facilitate a smooth transition.

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\_\_\_\_\_  
 PARENT NAME (Printed)

\_\_\_\_\_  
 PARENT NAME (Signature)

\_\_\_\_\_  
 day / month / year