



**Student's Name:** \_\_\_\_\_

**Teacher or School Director:** We appreciate your cooperation in completing this form. This form provides one way of getting to know the child and is reviewed with the full awareness that young children are constantly changing and developing. **Please note that we will accept the AISGW Common Recommendation Form in lieu of this form.** Be assured that all information received from you is **confidential**.

Name of person completing this form: \_\_\_\_\_ Relationship to the student: \_\_\_\_\_

I have known this student \_\_\_\_\_ years/months Name of School: \_\_\_\_\_

Director/Principal's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Length of school day: \_\_\_\_\_ Number of days per week: \_\_\_\_\_ Date of entry to your program: \_\_\_\_\_

Social Development	Advanced for age	Appropriate for age	Needs development	Not at acceptable Level	Did Not Observe	Comments
Separation from parents/guardians						
Interaction with parents/guardians						
Ability to share and work cooperatively						
Ability to wait turn						
Cooperative attitude						
Resolves conflicts appropriately						
Responds positively to redirection						
Respect for own property						
Respect for other's property and space						
Accepts responsibility for actions						
Uses language to problem solve						
Demonstrates self-control						
Interaction with peers						
Interaction with teachers						
Plays alone happily						
Initiates play activities						

Usually works best in :    large groups    small groups    alone

Physical Development	Advanced for age	Appropriate for age	Needs development	Not at acceptable Level	Did Not Observe	Comments
Fine motor coordination						
Gross motor coordination						
Body and space awareness						

Personal Characteristics	Advanced for age	Appropriate for age	Needs development	Not at acceptable Level	Did Not Observe	Comments
Self-help skills (clothes, bathroom, etc)						
Self-motivation						
Attention span for self-chosen activity						
Self-confidence in approaching tasks						
Sense of humor						
Curiosity						
Uses imagination						

Usually takes the role of:      leader      follower      varies

Pre-Academic Skill Development	Advanced for age	Appropriate for age	Needs development	Not at acceptable level	Did Not Observe	Comments
Follows directions and completes tasks						
Attention span for teacher initiated activity						
Ability to work independently						
Respects classroom routines						
Moves easily from one activity to another						
Is willing to try new activities						
Speech is clear and understandable						
Expresses ideas well						
Ability to stay on a discussion topic						
Vocabulary						
Uses appropriate pencil grip						
Draws with details						
Recognizes shapes						

What are this child's strengths/gifts? \_\_\_\_\_  
 \_\_\_\_\_

What are this child's challenges? What frustrates this child? \_\_\_\_\_  
 \_\_\_\_\_

Describe this child's approach to learning and indicate what kind of classroom environment would be a good match for this child. \_\_\_\_\_  
 \_\_\_\_\_

Family Information	Consistently	Usually	Sometimes	Rarely	Comment
Has realistic expectations for their child					
Communicates openly with the school					
Follows the rules and policies of the school					
Cooperates with classroom teachers					
Follows through with school recommendations					
Cooperates with school administration					
Participates in school activities					

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**It is required that the preparer return this form directly to:**

Grace Episcopal School, Office of Admissions, 3601 Russell Road, Alexandria, VA 22305

OR via email to [admissions@graceschoolalex.org](mailto:admissions@graceschoolalex.org). **Thank you for your assistance!**