

WEDDINGTON CHRISTIAN ACADEMY – K4, TK and K5 TEACHER/CAREGIVER QUESTIONNAIRE

Please return this form directly to us by mail or fax as soon as possible. Your information is required to complete this student’s entrance requirements.

Name of Student: _____

Days per week and hours student attends: _____

Teacher/Caregiver Name: _____

School Name: _____

School Address/City/State/Zip: _____

Date completed: _____

Teacher/Caregiver Signature: _____

PLEASE READ EACH STATEMENT AND CIRCLE THE LETTER THAT BEST DESCRIBES YOUR OPINION ABOUT THE STUDENT’S TYPICAL BEHAVIOR. We welcome your additional comments and supporting documentation regarding academic, social, emotional and developmental level of this student. Please use the back of this form as needed. If your students receive a progress report, we would appreciate that information as well.

Key: Y – Yes N - No S - Sometimes

Has enough energy to accomplish activities	Y	N	S
High energy level	Y	N	S
Is able to pay attention and focus	Y	N	S
Can be quiet when appropriate	Y	N	S
Easily distracted by background noises	Y	N	S
Upset by loud noises	Y	N	S
Can remain seated 15-20 minutes for an academic activity	Y	N	S
Follows directions	Y	N	S
Impulsive	Y	N	S
Easily frustrated	Y	N	S

Follows classroom routine and rules	Y	N	S
Participates successfully in group activities	Y	N	S
Plays well with others	Y	N	S
Is able to handle classroom transitions	Y	N	S
Has friendly interactions with others	Y	N	S
Cooperates easily	Y	N	S
Shares well	Y	N	S
Plays alone appropriately	Y	N	S
Play skills appropriate for age	Y	N	S
Demonstrates age-appropriate bathroom skills	Y	N	S
Can dress independently	Y	N	S
Exhibits age-appropriate table manners	Y	N	S
Has extreme mood swings	Y	N	S
Argues with children and adults	y	N	S
Is immature for age	Y	N	S
Requires excessive attention	Y	N	S
Age-appropriate motor skills	y	N	S
Normal visual skills	Y	N	
Normal hearing	Y	N	
Handles age-appropriate problems well	Y	N	S
Attempts to hurt or destroy	Y	N	S
Has adequate vocabulary for age	Y	N	S
Has age-appropriate expressive language	Y	N	S
Has age-appropriate receptive language	Y	N	S
Can identify 8 primary colors	All	Some	None
Can identify some shapes	Y	N	

Visual recognition of some letters of the alphabet	Y	N	
Knows some letter sounds	Y	N	
Visual recognition of some numbers	Y	N	
Can count to ten	Y	N	
Can count to twenty	Y	N	
Can recite short verse or nursery rhyme	Y	N	
Can count to twenty or higher	Y	N	
Can use scissors	Y	N	S
Has correct pencil grip	Y	N	S
Able to use age-appropriate art materials	Y	N	S

Does this child have any allergies? _____

Special dietary needs? _____

Special classroom needs? _____

Are there any diagnosed or suspected medical conditions or learning differences? If so, please describe: _____

Use one or two adjectives that best describes this child: _____

Strengths and weaknesses of this child: _____

COMMENTS:

Please mail or fax this form directly to:

Mrs. Adell Keen, WCA Principal
 Weddington Christian Academy
 13901 Providence Road
 Weddington, NC 28104
 School Phone: 704-846-1039
 School Fax: 704-846-1395

