



Child Assessment Report
DISCOVER FIRST STEP PVT. LTD.

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Child's Name _____ Sex _____

Name usually called: _____ Birthdate _____

Present School: _____ Phone: _____

Currently attends: # of days per week: _____ Hours per day: _____

Date of Admit: _____ How long have you known this child? _____ Date of this Rpt.: _____

Report submitted by: _____ Title: _____

Parent's Name(s) _____

Address: _____ Zip: _____ Phone: _____

Language spoken at home: _____ Does child speak other language? _____

CATEGORY	AREA OF STRENGTH	AGE APPROPRIATE	PROGRESSING TOWARDS AGE APPROPRIATE	AREA OF CONCERN	N/A
PHYSICAL DEVELOPMENT					
Gross motor coordination					
Participates in physical group activities					
Gait, fluidity, smoothness of movement					
Small motor coordination					
Participates in small motor activities					
Works with Playdoh, clay, water, sand					
Builds with blocks or manipulatives					
Draws, paints or glues					
Uses implements (forks/spoons) to feed self					
General Health					
PERCEPTUAL DEVELOPMENT					
Completes puzzles (how many pieces?)					
Notices, creates, replicates patterns					
Recognizes written name					

Comment: What are the child's favorite large motor activities?

What are the child's favorites small motor or perceptual activities?

CATEGORY	AREA OF STRENGTH	AGE APPROPRIATE	PROGRESSING TOWARDS AGE APPROPRIATE	AREA OF CONCERN	N/A
SOCIAL/EMOTIONAL DEVELOPMENT					
Separation from Parents/Caregivers					
Displays confidence					
Accepts limits/boundaries					
Willingly follows directions individually					
Willingly follows directions in group					
Displays impulse control					
Engages with peers (describe below)					
Engages with adults (describe below)					
Makes eye contact					
Resolves conflicts/disputes verbally					
Respects self—own property					
Respects others—their property					
Tolerates frustration –self chosen activity					
Tolerates frustration –assigned activity					
Appreciates humor —appropriately silly					
Ability to focus on activity					
Cooperative attitude					
Makes transitions easily					
Reacts positively to new events/change					

Comment: How would you describe the child's temperament?

What activities does the child especially enjoy?

Please describe the quality of this child's interactions with **classmates**: *Does the child play with children of both genders, show a preference for group or individual activities? Is the child a leader, follower, observer? Is the child kind to and considerate of other children?*

Please describe the quality of this child's interactions with **adults**:

CATEGORY	AREA OF STRENGTH	AGE APPROPRIATE	PROGRESSING TOWARDS AGE APPROPRIATE	AREA OF CONCERN	N/A
INTELLECTUAL DEVELOPMENT					
Receptive Skills					
Ably follows directions given to a group					
Ably follows directions given individually					
Converses with adults and children					
Expressive Skills					
Clear articulation (describe)					
Fluency of expression (as opposed to stammering)					
Vocabulary: uses precise words as opposed to fillers ('uhms')					
Remembers classmates/teachers' names					
Remembers and recites nursery rhymes					
Remembers and retells events/stories in sequence					
Creates dramatic play scenarios					
Asks why, how come questions					
Emergent Literacy					
Handles, browses, looks over books					
Enjoys being read to/asks to be read to					
Acts out favorite stories (books/media)					
Emergent Math					
Sorts objects in categories (animal/plant)					
Grades objects by size					
Names colors or shapes in environment					
Uses size comparison					
Understands over, under					

Comment: Please comment on the child's language and speech development. Has the child been recommended for speech or language evaluation or therapy? Any idiosyncratic language? (Please be specific.)

Please comment briefly on any physical, social-emotional, or intellectual strengths or concerns, including general health.

FAMILY

Is there anything significant about the home life which will help us understand this child? (new baby, move, divorce/separation)

Have all financial obligations been met?

Have you received active cooperation from the parents?

To your knowledge, is the parent's perception of the child compatible with the school's understanding of the child?

Please describe parent's involvement with the school:

Name: _____ Signature: _____
(Please Print)

Position: _____ Date: _____