



# IEP Preparation Form (Teacher)

Overview of Child's Performance in a General Education Preschool

Child's Name \_\_\_\_\_ Site \_\_\_\_\_ Preschool Teacher \_\_\_\_\_ Date \_\_\_\_\_

Date	Preschool Screenings	Results	
	General Development (excluding Communication)	<input type="checkbox"/> Passed	<input type="checkbox"/> Referred to Child Development Support Staff
	Communication (Speech/Language)	<input type="checkbox"/> Passed	<input type="checkbox"/> Referred to School-site Speech Therapist
	Social/Emotional	<input type="checkbox"/> Passed	<input type="checkbox"/> Referred to Child Development Social Worker

<p><b><u>CHILD'S STRENGTHS</u></b></p>	<p><b><u>TEACHER'S CONCERNS</u></b></p>
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<p><b><u>ACCOMMODATIONS MADE IN THE CLASSROOM</u></b></p>
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## Information regarding the Preschool child's abilities:

### Alphabet knowledge

Knows letters of the alphabet: Uppercase \_\_\_\_ of 26    Lowercase \_\_\_\_ of 26

Knows letter sounds    Notes: \_\_\_\_\_

Recognizes:  First Name     Last Name    Notes: \_\_\_\_\_

Writes:  First Name     Last Name    Notes: \_\_\_\_\_

Knows age

### Number Skills

Rote Counts up to \_\_\_\_    Notes: \_\_\_\_\_

One to one Correspondence up to \_\_\_\_ objects    Notes: \_\_\_\_\_

Recognizes Numbers    Notes: \_\_\_\_\_

### Colors/Objects

Recognizes colors    Notes: \_\_\_\_\_

Matches colors    Notes: \_\_\_\_\_

Matches/sorts objects    Notes: \_\_\_\_\_

Knows size/position/directions (ie; up and down)    Notes: \_\_\_\_\_

### Fine Motor Skills

Able to draw a person with parts of a body    Notes: \_\_\_\_\_

Draws beyond scribbling    Notes: \_\_\_\_\_

Able to cut with scissors    Notes: \_\_\_\_\_

Grasps writing tool with tripod grip    Notes: \_\_\_\_\_

Can stack small blocks up to    Notes: \_\_\_\_\_

Able to complete simple puzzles    Notes: \_\_\_\_\_

Able to copy forms (line, X, circle, square, rectangle)    Notes: \_\_\_\_\_

### Gross Motor Skills

Able to go up/down stairs alternating feet    Notes: \_\_\_\_\_

Able to pedal a bike    Notes: \_\_\_\_\_

Able to throws/catches a ball    Notes: \_\_\_\_\_

Able to run/hop/climb/skip/jump with two feet    Notes: \_\_\_\_\_

### Personal Skills

Names body parts    Notes: \_\_\_\_\_

Able to feed self with spoon/fork    Notes: \_\_\_\_\_

Able to drink from a cup    Notes: \_\_\_\_\_

Able to dress self, do buttons/zippers    Notes: \_\_\_\_\_

Able to use the toilet independently    Notes: \_\_\_\_\_

### Social Skills

Able to have conversations with others    Notes: \_\_\_\_\_

Able to speak in 3-5 word sentences    Notes: \_\_\_\_\_

Shares joy/affect with others    Notes: \_\_\_\_\_

Able to answer questions (who what where,etc)    Notes: \_\_\_\_\_

Participates in organized play with others    Notes: \_\_\_\_\_

Plays independently    Notes: \_\_\_\_\_

Able to wait/share/take turns    Notes: \_\_\_\_\_

### Other School Readiness Skills

Able to follow 1-2 step directions    Notes: \_\_\_\_\_

Able to follow daily routines    Notes: \_\_\_\_\_

Can sit and listen to a story    Notes: \_\_\_\_\_

Can answer/recall facts/information shared    Notes: \_\_\_\_\_

Able to cooperate and interact in group experiences    Notes: \_\_\_\_\_

### Comments: