

Early Entrance Process

SY 2019-2020

The early entrance process for K and 1st is as follows:

1. School ensures the early entrance referral form is completed by the family and the school returns it to Kathy Compton.
2. Kathy sets the student up for Reading Early Literacy and Math Early Numeracy NWEA Screenings.
3. Completed referral form sent to Kathy, but testing can occur before the referral form is complete/returned.
4. If the screening results qualify ("Medium" or "High" in Reading or Math) and school committee thinks the student should be admitted, then the NWEA results and completed survey are sent to Mark to get formal approval from the Board/Board designee.
5. Mark informs Principal, OM, Kathy, and Lauren of final determination.

Early Entrance Policy

Each child who is five years of age on or before September 30 shall be eligible to enroll in kindergarten. Each child who is six years of age on or before September 30 shall be eligible to enroll in first grade.

A child who does not meet the age requirements set forth above, but who will be five or six years old, respectively, prior to the first day January of the school year in which admission is requested and who is referred by the child's parent or guardian, an educator employed by the School, a preschool educator who knows the child or a pediatrician or psychologist who knows the child shall be evaluated for early admittance by the School's Early Entrance Evaluation Committee. The School's Evaluation Committee shall interview the parent or guardian and child and arrange for the necessary testing. The testing will include a nationally normed test in addition to observations of the child. The School's governing authority/board of directors shall have the final authority on whether to admit or not admit the student based upon recommendations from the Committee.

If a child for whom admission to kindergarten or first grade is requested will not be five or six years of age, respectively, prior to the first day of January of the school year in which admission is requested, the child shall be admitted only in accordance with the school's Acceleration Policy.

Parent Checklist (continued)

Language and Literacy	Frequently	Sometimes	None of the Time
Listens for meaning in stories, discussions, and conversations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaks clearly, to share ideas and thoughts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can identify letters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can identify beginning sounds.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses letters and words to write.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writes name.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mathematical Thinking			
Can recognize numbers 0-20.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can orally count forward to 30.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can recognize, duplicate, and extend simple patterns (circle-triangle, circle-triangle, circle-triangle).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can recognize and describe attributes of shapes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scientific Thinking			
Uses a magnifying glass to look at different objects.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identifies, describes, and compares properties of objects.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Describes characteristics and basic needs of living things (food, water, shelter).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Studies			
Recognizes self and others as having same and different characteristics.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Describes roles and responsibilities of people. (Firefighters put out fires).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes the reasons for rules.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Arts			
Likes to paint and draw.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Likes to sing and dance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can share ideas about a drawing/painting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Parent Questionnaire

Directions: Please answer each question below. If additional space is needed, use the back of this form.

1. Why do you feel your child should be considered for early entrance to kindergarten?

2. How long does your child maintain interest in a play activity or game at a given time? _____

Parent Checklist (continued from page 2)

3. What responsibilities does your child have at home? What do you do when your child does not follow through?

4. How does your child respond when he/she tries, but cannot do something?

5. What types of reading activities does your child engage in at home?

6. What kinds of experiences has your child had with writing tools, such as crayons, pencils, and markers?

7. What does your child know about numbers, shapes, and patterns?

8. How does your child handle transitions and new situations?

9. How does your child interact with other children? Please explain and consider whether or not your child shares, takes turns, and cooperates with peers?

Early Entrance Teacher Checklist

Student Name: _____

Date of Birth: _____

A request has been made by parent/legal guardians for the above named student to be considered for early entrance admission to Kindergarten or 1st Grade. As the child's current early childhood education teacher or service provider, we are requesting your assistance with this checklist.

The web link to the Ohio Department of Education's booklet entitled: A Standards Guide for Families: What is Expected in Grade K outlines the grade level indicators and benchmarks of skills expected of all kindergarteners in Ohio. Please evaluate the above named student based on the criteria presented in the link below:

<http://education.ohio.gov/Topics/Academic-Content-Standards/New-Learning-Standards>

Evaluator: ☐ Teacher, ☐ Service Provider, ☐ Parent, ☐ Other: _____)

PLEASE CHECK PERFORMANCE LEVEL IN EACH AREA

Kindergarten Academic Content Areas:

	Mastered Skills (90%+ accuracy)	Working on Mastery Skills (75% to 90%)	Instructional Phase Skills (50% to 75)	Not Introduced or Observed Skill(s)	
(Language Arts)					
Reading Standards for Literature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Reading Standards for Informal Text	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Foundational Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Speaking and Listening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(Mathematics)					
Counting and Cardinality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Operations and Algebraic Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Number and Operations Base Ten	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Measurement Data	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Geometry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(Science)					
Earth and Space Sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Life Sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Physical Sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(Social Studies)					
History	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Geography	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Government	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Economics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Please rate this child's performance in relation to his/her current peer group.	Top 5%	Top 10%	Top 25%	Upper Half	Lower Half
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signature of Person Completing Form X _____ Date _____
School Affiliation: _____

Additional considerations:

As a parent, I understand that a child's success in school depends on support at home. I am able to give my child additional support to help in his/her transition to a new setting with much higher academic demands than he/she encountered in preschool.

My child:

- Is enthusiastic about going to kindergarten;
- Enjoys learning new information or skills;
- Is curious about many things and asks questions often;
- Concentrates on certain activities much longer than other children his/her age;
- Reads (and understands text) in picture books or chapter books;
- Figures out math-related problems better than other children his/her age;
- Due to social/emotional concerns for the child or family, acceleration may not be advisable if:
 - Has one or more older siblings in the grade in which he/she will be placed if admitted by early entrance;
 - Often did not want to attend preschool or missed preschool often because of illness or family issues.

Parent Referral (REQUIRED for all children)

I believe that my child exhibits a number of the characteristics listed above that indicate he/she might benefit by entering the grades K-12 program. I have reviewed the considerations above and do not feel they would negatively impact my child's success in school. I request evaluation for my child for possible early entrance to school.

Parent/Guardian _____ X _____
Please print Signature Date

- Is English your child's first language? ☐ Yes ☐ No

If "No", what is your child's primary home language? _____

- Is an interpreter required for this evaluation? ☐ Yes ☐ No

Professional Referral (REQUIRED if child's birthday is January 1 or later)

I believe that the referred child exhibits a number of the characteristics listed above that indicate he/she might benefit by entering the grades K-12 program. I have reviewed the considerations above and do not feel they would negatively impact the child's success in school. I request evaluation for this child for possible early entrance to school.

Professional's Name _____ X _____
Please print Signature Date

☐ Pediatrician ☐ Psychologist ☐ Licensed Educator Practice/School _____

The referral request will be processed, and parents will receive the final determination for early entrance within 60 days from the date the referral is received.

Appointments not kept, or "no shows" will not be rescheduled

School Representative Receiving Referral _____

(Verify the following: Parent/guardian driver's license/state ID, child's birth certificate, immunization records, utility bill matches address on application, and necessary custody documents or court orders stating district of residence)

Elementary School _____

For Office Use Only: Date Received ____/____/____ Initials of Receiver _____ Date of Appointment ____/____/____
Birth Certificate _____ Proof of Residency _____