

Phone: (760) 346-3513 \* Fax: (760) 773-0673 \* www.sacredheartpalmdesert.com

## KINDERGARTEN RECOMMENDATION FORM

Students entering Kindergarten in Fall 2023

Child's	ild's Name			Date o	Date of Birth	
Name	of Current School					
School	address					
City			S	tate	Zip	
To the	Pre-School teacher:					
			is ap	plying for admiss	ion to Sacred Heart Scho	ol for
presch comple directl	ool. The information	requested on. We app nool, 43-77	will be kept i reciate your po 5 Deep Cany	n strict confider rofessional obser on Road, Palm D		the time to
тпе ра	ilents of this child give	permission	TOT US TO TECE	ve your recomme	endation.	
Parent/Guardian Signature					Date	-
A.	Physical development (please of Large motor skill development Fine motor skill development			average	n) needs more time needs more time	
B.	Emotional development (please 1. Personality confider assertive quiet pleasant		nt e	scriptions that ap outgoing nervous tense friendly	ply) aggressive distractible shy cooperative	
	2. Behavior	enthusiastic responsive		sharing self-confident	receptive hostile	
	3. Moods	contente angry happy		even tempered withdrawn outgoing	d controlled sullen	
C.	Intellectual and acad is curious is persistent follows direct			ndently vely	scriptions that apply) focuses on work shares with others cooperates with others	
D.	Uses rich voo	nmunication (please circle all descrip Uses rich vocabulary Speaks clearly		ons that apply) responds to what others are saying others		

E.	Social Development (please circle all desci General behavior	riptions that apply) <b>Play behavior</b>				
	follows rules exhibits independence shares with others demonstrates possessiveness enters into suggested activities is comfortable with adults is comfortable with peers has control with toilet habits	interacts with peers positively plays alone takes the lead initiates activity enters into group play follows others shows bossiness quarrels				
F.	This student is (please circle all description self-motivated regular in attendance	ns that apply) well organized cooperative with school program				
G.	The parents are (please circle all descriptions that apply)  cooperative with school consistent with discipline interested in education have realistic expectations for their child					
H.	Is this child receiving support services? ( Speech Hea Counseling Other					
l.	What do you consider to be this student's greatest strength?					
J.	In your judgment, what are the areas of gi	reatest need in this student?				
K.	Please check one of the following:					
	I highly recommend I recommend	I recommend with reservation I do not recommend at this time.				
L.	Additional comments:					
0:						
Signa	ture:	Date:				