STUDENT’S NAME: _________________________ DATE: _________________________

CHECK ALL ITEMS THAT APPLY TO THE STUDENT.

___ The student is currently attending a preschool program for nondisabled _______ year old children.

   How long has the student attended this preschool program? _______months/years

___ The student is currently attending a preschool program and has access to a research based curriculum by a highly qualified teacher.

   How long has the student attended this preschool program? _______months/years

___ The student attends a certified daycare program.

   How long has the student attended this certified daycare program? _______months/years

___ The student attends a home daycare program.

   How long has the student attended this home daycare program? _______months/years

___ Parent reports the student has had access to age appropriate activities for a preschooler such as: play dates with peers, Sunday school class, story time at the public library.

___ The student has received instruction and/or therapy through Early Intervention.

___ The student has received private speech therapy services.

___ The student has the opportunity to participate in age-appropriate activities through interactions with peers and siblings.

___ The parent reports that he/she reads to the student daily.

___ The parent reports that the child has progressed according to research based developmental normative charts.

___ Other  ________________________________________________________________

______________________________________________________________________

Name of person completing this form: ________________________________