



St. Simon the Apostle Catholic School

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ST. SIMON SCHOOL EARLY CHILDHOOD TRANSFER FORM

The purpose of the Transfer Form is to provide information about individual children and their prior learning experiences in an attempt to assist in the transition from an early childhood setting to a school setting.

NAME OF CHILD _____ BIRTHDAY _____

EARLY CHILDHOOD PROGRAM _____

ADDRESS OF PROGRAM _____ ZIP _____

TEACHER _____ DIRECTOR _____

Child's attendance patterns was as follows:

_____ full days _____ half days _____ 5, _____ 4, _____ 3, _____ 2, or _____ 1 days per week

Dates attended: _____ to _____

Description of Child's Progress: rate the child in the areas below using the following rating scale

1 = not in evidence yet 2 = sometimes 3 = almost always

COGNITIVE SKILLS

LANGUAGE SKILLS

- _____ expresses self in sentences
- _____ follows verbal directions
- _____ participates in discussions
- _____ exhibits rich and growing vocabulary
- _____ listens and pays attention

MATH-SCIENCE THINKING

- _____ recognizes colors
- _____ recognizes shapes
- _____ counts objects from _____ to _____
- _____ classifies objects
- _____ observes details
- _____ perceives differences/similarities

COMMENTS:

COMMENTS:

SOCIAL / EMOTIONAL SKILLS

- | | |
|--|-------------------------------------|
| _____ respects others | _____ cares for self in bathroom |
| _____ works well with others | _____ dress self for outdoor play |
| _____ expresses feelings appropriately | _____ enjoys the school environment |
| _____ adjusts to routines and rules | |

COMMENTS: _____

PHYSICAL DEVELOPMENT

GROSS MOTOR SKILLS

- | | |
|--------------------------------|-------------------------|
| _____ moving, hopping, jumping | _____ climbing |
| _____ balancing | _____ spatial awareness |

COMMENTS: _____

FINE MOTOR SKILLS

- | | |
|--|-----------------------------|
| _____ manipulating puzzles, pegs, etc. | _____ cutting with scissors |
| _____ handling crayons, pencils, etc. | |

COMMENTS: _____

CREATIVE ARTS

- _____ expresses self in music and creative movement

COMMENTS: _____

ADDITIONAL INFORMATION

COMMENTS: _____

TEACHER SIGNATURE _____

Please mail to: **St. Simon the Apostle Catholic School**
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