

Preschool Behavior Checklist K-4
Oakbrook Preschool

1. Today's Date-

2. Completed By-

Understanding that each child is uniquely created by God for His purpose, it is the goal of Oakbrook Preschool staff to gain knowledge about each student. The purpose of this questionnaire is to help the parent prepare his/her child for school and to help the teacher prepare the optimum learning environment. It is not the expectation of the staff that every child will always behave as stated in the questionnaire. Our staff wants to make the Preschool an enjoyable learning experience for everyone enrolled.

For each statement mark the letter A if the statement ALMOST ALWAYS or ALWAYS applies to how you raise your child. Mark the letter F if the statement FREQUENTLY applies. Mark the letter S if the statement SOMETIMES applies. Mark the letter N if the statement ALMOST NEVER or NEVER applies.

A= ALMOST ALWAYS/ALWAYS F=FREQUENTLY S= SOMETIMES N= ALMOST NEVER/NEVER

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| 1. I spend an hour each day playing with or reading to my child. | A F S N |
| 2. My child should be able to toilet without help (manage clothes, operate facilities, etc). | A F S N |
| 3. My child is able to stay dry during the day. | A F S N |
| 4. My child can feed himself/herself using a fork and spoon, and drink from a cup without a top. | A F S N |
| 5. My child takes naps. | A F S N |
| 6. My child should be able to walk up and down stairs using the rail. | A F S N |
| 7. My child can catch a bouncing ball. | A F S N |
| 8. My child enjoys playing dress up and make believe. | A F S N |
| 9. My child can follow directions and take turns when playing simple games. | A F S N |

10. My child is able to share toys. A F S N
11. My child should be able to solve problems he/she has with other children. A F S N
12. My child can say his/her first and last name. A F S N
13. My child knows his/her address and/or telephone number. A F S N
14. My child separates in a reasonable amount of time from a parent. A F S N
15. My child can draw simple shapes and faces. A F S N
16. I talk to or hold my child when he/she is scared. A F S N
17. My child should be able to name at least 5 body parts. A F S N
18. I expect my child to help with some simple household chores. A F S N
19. My child puts away his/her toys when asked. A F S N
20. My child has a regular bedtime routine (bath, story, prayers, etc.). A F S N
21. My child enjoys working simple puzzles. A F S N
22. My child should be able to play alone for 30 minutes. A F S N
23. My child's speech is understandable to most people. A F S N
24. My child is demanding of my attention. A F S N
25. My child responds in a timely manner when I ask him/her to change activities. A F S N
26. My child is able to hold a pencil or crayon correctly. A F S N
27. My child is able to cut with scissors. A F S N