

HINGHAM PUBLIC SCHOOLS
Hingham, Massachusetts

PRE-KINDERGARTEN INFORMATION FORM

TO BE COMPLETED BY PARENT/GUARDIAN

Child's Legal Name: _____ Date of Birth: _____

Address: _____

Assigned Hingham Public Elementary School (please circle): East South PRS Foster

I authorize my child's preschool/day care provider to forward this information to the Hingham Public Schools.

Parent/Guardian Signature

PRESCHOOL TO COMPLETE AND RETURN TO ASSIGNED HINGHAM SCHOOL

Please check the appropriate box and add any comments that would help in facilitating the student's entry, adjustment to, and transition to kindergarten.

	Age Appropriate, Yes or No	Comments
Participates appropriately in groups		
Follows directions		
Understands/follows classroom rules		
Activity level		
Self-help skills		
Uses material/equipment appropriately		
Demonstrates understanding of concepts introduced		
Demonstrates appropriate fine motor skills		
Demonstrates appropriate gross motor skills		
Speech is intelligible		
Verbally expresses ideas in sentence form		
Interacts with peers		
Initiates activities with peer group		
Interacts with adults appropriately		
Waits for his/her turn		
Has positive attitude/self-image		
General maturity		

Talents, skills, or interests, additional comments:

Form completed by: _____

Preschool/day care provider: _____

**Please return this information form to this child's assigned school office when completed.
Addresses are below.**

East School
2 Collins Street
Hingham, MA 02043

Plymouth River School
200 High Street
Hingham, MA 02043

South School
831 Main Street
Hingham, MA 02043

William L. Foster School
55 Downer Avenue
Hingham, MA 02043