

6. Please respond to the following:

- a. How does your child typically communicate?
- b. Does your child ask questions? Yes No
- c. Is your child able to speak in clear sentences? Yes No
- d. Does your child respond appropriately to yes and no questions? Yes No
- e. Do you have any speech and/or language concerns for your child? Yes No
- f. Has your child had the opportunity to interact with individuals with special needs?

Yes No Please describe:

Please check the appropriate answer for the following questions.

	Independently	With help	Not yet
Uses the bathroom			
Washes and dries hands			
Puts on & takes off coat			
Drinks from an open lid cup			
Feeds self with utensils			
Waits patiently for your attention			
Follows simple directions			
Entertains self, at least 5 minutes			
Attends to story from a book			
Answers who, what, where questions			
Comments on things in their environment			
Waits for turn			
Initiates interactions with peers			
Shares with peers			

8. What would you like your child to gain by participating as a positive peer model?

Thank you for your interest in this class. You will be contacted if your child is selected for an assessment.

Please complete and return the application ASAP.

Please complete the application and bring or mail to FSSD Central Office – Attention: Beth Farrar. When an application is received, a preschool teacher will contact parents to set up a time to assess the child. Once a child is determined eligible for the program, s/he will enter a “lottery” to be chosen for the program.

If you have questions, please contact Beth Farrar, Supervisor of Special Populations. 615/794-6624
farrareli@fssd.org

***Franklin Special School District Central Office, 507 New Highway 96 West, Franklin, TN 37064

The program follows the 2019-20 FSSD calendar found on the FSSD website, but the first day of preschool is currently set for Monday, August 19th.

www.fssd.org

Completed by School Personnel

Date Received: _____ Received By: _____

Assessment Results: _____

Accepted into the program: YES NO

School Assignment: _____

Assessment team members: _____
