Lower Columbia College Head Start/ECEAP
Kindergarten Transition Tool

Child's Picture

Date: _____ HS/ECEAP Site: _____ Teacher: _____
Child's Name: _____ Birthdate: _____
Parent's Name: _____ School: _____
Date Child Enrolled _____ Attendance _____

	Social and Emotional Learning – TS GOLD Standards	We are working on this.	Yes, the student can do this.
1	Student can follow 2-step directions consistently and is beginning to follow 3-step directions.		
2	Student can remember and follow routines (ex. lunchtime, whole group to small group, etc.)		
3	Student can tell about his/her own feelings (ex: I feel sad, I feel excited)		
4	Student can calm him/herself when frustrated or upset.		
5	Student can put on his/her own coat.		
6	Student can use the bathroom independently.		
7	Student can wash his/her own hands.		
8	Student can put away toys, clean up small spills, and pick after him/herself.		
9	Student shares, takes turns, and helps others.		
10	Student adjusts to new situations and/or people.		
11	Student plays cooperatively with others.		
12	Student can comfort others.		
13	Student has the opportunity to play regularly with the same friends his/her age.		

Additional Comments/Special Accommodations, i.e. Visual Schedule, Picture Chart, Cube Chair, etc.:

Referred to the school district: ☐ Yes ☐ No If yes, what was the outcome?

List information the child's parent would like the transitioning school district to know (strengths/concerns):

List the most effective form of communication with family: _____
☐ Child is English Language Learner ☐ Siblings attending ☐ Homeless ☐ Health/Nutrition Concerns
☐ Attendance Concerns ☐ IEP ☐ Child/Family Support Plan

(C: 07/02; R: 03/23)

Fall Date _____

HAVE THE CHILD PRINT NAME

(Obj. 7b,19a)

HAVE THE CHILD DRAW A SELF-PORTRAIT

Write what the child says about their picture:

Winter Date _____

HAVE THE CHILD PRINT NAME

(Obj. 7b,19a)

HAVE THE CHILD DRAW A SELF-PORTRAIT

Write what the child says about their picture:

Spring Date _____

HAVE THE CHILD PRINT NAME

(Obj. 7b,19a)

HAVE THE CHILD DRAW A SELF-PORTRAIT

Write what the child says about their picture:

Use alphabet cards to check what letters the child can name.

	Fall		Winter		Spring	
Letter Recognition	Upper Case Letter No Prompts	Lower Case Letter No Prompts	Upper Case Letter No Prompts	Lower Case Letter No Prompts	Upper Case Letter No Prompts	Lower Case Letter No Prompts
L/l						
F/f						
E/e						
H/h						
T/t						
I/i						
U/u						
C/c						
O/o						
Q/q						
G/g						
S/s						
J/j						
D/d						
P/p						
B/b						
R/r						
K/k						
A/a						
M/m						
N/n						
V/v						
W/w						
X/x						
Y/y						
Z/z						

Letter Sounds

Document each letter sound that the child knows.	
Fall	
Winter	
Spring	

Number Recognition

Numbers (Obj. 20a/c)	**Fall**	**Winter**	**Spring**
	Names Number	Names Number	Names Number
3			
1			
4			
7			
10			
2			
5			
8			
6			
9			
11			
15			
12			
14			
13			

List the numbers they count to:			
Counting (Obj. 20a/c)	**Fall**	**Winter**	**Spring**
Rote Counts to:			
Verbally Counts objects to:			
After counting items can state how many in all:	◯ Yes / No ◯	◯ Yes / No ◯	◯ Yes / No ◯
Tells what number comes next in order:	◯ Yes / No ◯	◯ Yes / No ◯	◯ Yes / No ◯

Put an "x" on the color or shapes the child knows.							
Colors				**Shapes**			
	Fall	**Winter**	**Spring**		**Fall**	**Winter**	**Spring**
Red				Circle			
Yellow				Square			
Blue				Rectangle			
Green				Triangle			
Purple				Heart			
Black				Star			
Orange				Hexagon			

Any other comments about development that will support this child in transitioning to Kindergarten?