



**1yo Progress Report**

Teachers Name: \_\_\_\_\_

Students Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Evaluation Key:**

**G=** I Got It!

**L=** I'm Still Learning

**N=** Not Yet Assessed

Literacy & Math		Fine Motor Skills		Letter Recognition		Social/Emotional	
	I can recite the alphabet		Scissors can be properly held and used		A		N
	I can count from one to _____		I can properly grip a pencil		B		O
	I can sort objects by shape, size and color		I can put on my jacket		C		P
<b>General Knowledge &amp; Science</b>			I can put on my hat		D		Q
			I can clap my hands		E		R
			I can wave goodbye		F		S
			I can feed myself with a spoon		G		T
			I can point		H		U
	I know my name		I can build blocks		I		V
	I know my age		I can scribble		J		W
	I know my body parts		I can pick up object		K		X
	I can recognize some farm animals				L		Y
					M		Z
							I enjoy playing with others
							I can wait my turn
							I can share with others
							I show empathy to my friends
							I am respectful to my peers
							I am respectful to my teachers
							I can actively listen
							I participate in class
							I can follow routine



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



**N=** Not Yet Assessed

**Number Recognition**

	1		2		3		4		5
	6		7		8		9		10

Teacher Comments:

**Shapes Recognition**

**Primary Colors Recognition**

	<input type="checkbox"/> Red
	<input type="checkbox"/> Yellow
	<input type="checkbox"/> Blue
	<input type="checkbox"/> Purple
	<input type="checkbox"/> Pink
	<input type="checkbox"/> Green
	<input type="checkbox"/> White
	<input type="checkbox"/> Black
	<input type="checkbox"/> Gray