Teachers Name: $\qquad$

## Evaluation Key:

## G= I Got It! <br> L= I'm Still Learning <br> $\mathbf{N}=$ Not Yet Assessed

Students Name: $\qquad$

## Pre-K Progress Report

Class: $\qquad$
Date: $\qquad$

Fine Motor Skills

|  | Scissors can be properly held and used |
| :--- | :--- |
|  | I can properly grip a pencil |
|  | I can put on and zip my jacket |
|  | I can put on my socks and shoes |
|  | I can tie my shoes |

General Knowledge and Science

|  | I know my name |
| :--- | :--- |
|  | I know my age |
|  | I know my birthdate |
|  | I can retell a story |
|  | I know the 5 senses |
|  | I know my left from right |

Letter Recognition

|  | A |  | N |
| :--- | :--- | :--- | :--- |
|  | B |  | O |
|  | C |  | P |
|  | D |  | Q |
|  | E |  | R |
|  | F |  | S |
|  | G |  | T |
|  | H |  | U |
|  | I |  | V |
|  | J |  | W |
|  | K |  | X |
|  | L |  | Y |
|  | M |  | Z |


|  | A |  | N |
| :--- | :--- | :--- | :--- |
|  | B |  | O |
|  | C |  | P |
|  | D |  | Q |
|  | E |  | R |
|  | F |  | S |
|  | G |  | T |
|  | H |  | U |
|  | I |  | V |
|  | J |  | W |
|  | K |  | X |
|  | L |  | Y |
|  | M |  | Z |


|  | 1 |  | 11 |
| :--- | :--- | :--- | :--- |
|  | 2 |  | 12 |
|  | 3 |  | 13 |
|  | 4 |  | 14 |
|  | 5 |  | 15 |
|  | 6 |  | 16 |
|  | 7 |  | 17 |
|  | 8 |  | 18 |
|  | 9 |  | 19 |
|  | 10 |  | 20 |

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Literacy \& Math

| I can recite the alphabet |
| :---: |
| I can count from one to |
| I can sort objects by shape, size and color |
| I can recognize patterns |
| I can recognize same and opposites |
| I can write my first name\} |
| I can write my last name |
| I know my days of the week |
| I know my months of the year |
| I can do basic addition using my fingers |
| I can do basic subtraction using my fingers |
| I can read a one to 5 site words |
| I can read 5 or more site word |

Shapes Recognition


## Primary Colors Recognition

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Social/Emotional

|  | 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 teacher |
|  | I participate in class |
|  | I can foctively listen on school work |
|  | I can follow routines |
|  | I can complete a task |

