



**BISHOP ANSTEY JUNIOR SCHOOL
PRE SCHOOL STUDENT ASSESSMENT**

Name of Child _____

Last Name

First Name

Date of Birth _____ Age _____

Day

Month

Year

Date of Entry _____

Day

Month

Year

Name of Pre School _____

Address _____

Telephone No _____

Please tick the appropriate column using this rating:

1 – Very Good

2 – Good

3 – Fair

4 – Cannot yet cope

GENERAL READINESS:	1	2	3	4
Listens to and follows simple instructions				
Sits and listens attentively to the reading of a short story				
Shows independence e.g. carries own bag; opens lunch kit				
Uses the bathroom independently				
Eats his/her own lunch without assistance				
Is able to sit and complete a short activity				
Waits his/her turn				
Packs and cleans up after an activity				
Interacts in a co-operative manner with peers and adults				
Is able to follow daily classroom routine				
ACADEMIC READINESS:	1	2	3	4
Sorts by shape, size, colour				
Participates in Music and Art activities				

REMARKS ON SOCIAL BEHAVIOUR AND LEVEL OF READINESS FOR FORMAL
PRIMARY EDUCATIONAL SETTING:

Principal of Pre School:

Print Name: _____

Signature: _____

Date: _____

Place SCHOOL STAMP here if available

N.B. Kindly ask the Principal of your child's pre school to email this form to BAJS at: enrolment@bajs.edu.tt