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New Student Pre-Registration

Student Name _____ **Grade Entering** _____

Parent/Gaurdian Name(s) _____

We look forward to getting to know your child personally, but right now you are the expert and we appreciate any insights you can give us. Please fill out the first page of this form, and ask your child's current teacher to fill out the second page. If that is not possible or your child is new to school, please fill it in to the best of your knowledge. If your child is entering Preschool or Kindergarten and is new to a school environment, you can skip the second page. You can also fill this form out online at countryclassroom.org/preregistration.

What makes your child unique and wonderful?

What is challenging for your child?

What do you hope your child gets out of our program?

Does your child have any special needs?

Is there anything else that you think would be helpful for us to know about your child?

Thank you for your insights!

Student Name _____ Grade Entering _____

Parent/Gaurdian Name(s) _____

Teacher's Name _____ You can also fill this form out online at countryclassroom.org/preregistration.

This student can...	Usually	Sometimes	Seldom	Never	Comments?
be attentive in a group.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
contribute to group discussions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
follow directions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
work cooperatively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
work independently.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
move easily from one activity to another.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
maintain focus and complete tasks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
be willing to try new activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
handle conflicts with peers in an appropriate manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
get and maintain the attention of adults in acceptable ways.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Please tell us any other important considerations for this child's social and/or work skills.

When thinking about this child's academic skills, please tell us what you can about each area.

Reading _____

Writing _____

Math _____

Oral Expression (participating in discussions, songs, plays, oral reports, etc.) _____

Thank you for your insights!