

|              |              |      |
|--------------|--------------|------|
| Child's Name | Center/Class | Date |
|--------------|--------------|------|

**Put a tally in the box for every 15 minutes that you and your child worked on the activity. Examples are in *italics*.**

Person completing form (please print) \_\_\_\_\_ Signature \_\_\_\_\_

| <b>COGNITION AND GENERAL KNOWLEDGE</b>  | <b>TIME SPENT</b> |
|---|-------------------|
| Colors (red, yellow, blue, black, green, purple, gray, orange, white, pink, brown).                   |                   |
| Shapes (circle, square, triangle, oval, diamond, rectangle, star, heart).                             |                   |
| Practice Opposites: most/least, empty/full, night/day, whole/half                                     |                   |
| Sort objects by 2 properties -size, color, shape, use. " <i>Put all the small white socks here.</i> " |                   |
| Other/Comments:   |                   |
| Totals (for office use)   |                   |

| <b>CREATIVE ARTS</b>  | <b>TIME SPENT</b> |
|---|-------------------|
| Draw a person. ( <i>arms, legs, body and facial features</i> ).     |                   |
| Practice drawing shapes ( <i>circle, triangle, square</i> )         |                   |
| Sing children songs ( <i>Wheels on the bus, Old McDonald, etc</i> ) |                   |
| Others/Comments:  |                   |
| Totals (for office use)   |                   |

| <b>LANGUAGE AND LITERACY</b>                                 | <b>TIME SPENT</b> |
|--|-------------------|
| Reading to your child  |                   |
| Recite monthly nursery rhyme (Found on classroom newsletter) |                   |
| Say 2 words and have your child tell you if the words rhyme. |                   |
| Practice writing first name without a sample.                |                   |
| Draws a picture and tells what it is.                        |                   |
| Practice identifying letters – Upper case.                   |                   |
| Practice writing Upper case letters.                         |                   |
| Other/Comments:  |                   |
| Totals (for office use)                                      |                   |

| <b>MATH</b>  | <b>TIME SPENT</b> |
|--|-------------------|
| Practice number identification 1-10  |                   |
| Practice writing numbers 1-10  |                   |
| Count 10 objects using one to one correspondence. (make sure they touch each item while counting them) |                   |

**School Readiness In-Kind Sheet 2 *Please turn in to teacher!***

|   |  |
|---|--|
| Practice repeating and extending a pattern. <i>Fork, spoon, fork, spoon</i> |  |
| Baking (counting, measuring, etc)   |  |
| Other/Comments:   |  |
| Totals (for office use)   |  |

| <b>PHYSICAL DEVELOPMENT AND HEALTH</b>                                 | <b>TIME SPENT</b> |
|--|-------------------|
| Balance on one foot.   |                   |
| Hop on one foot  |                   |
| Practice throwing/catching a ball                                      |                   |
| Cut on a curved line.  |                   |
| Fine motor activities: ( <i>Play with Legos, play dough, puzzles</i> ) |                   |
| Others/Comments:   |                   |
| Totals (for office use)  |                   |

| <b>SCIENCE/SOCIAL STUDIES</b>  | <b>TIME SPENT</b> |
|--|-------------------|
| Discuss living vs nonliving items ( <i>Discuss what living things need. plant vs car, dog vs cup- look at magazines or things in environment and label items living or nonliving</i> ) |                   |
| Discuss daily weather: Is it cloudy, sunny, rainy, etc? Warm or cold? Proper dress for weather. Discuss season and changes. Graph weather.   |                   |
| Others/Comments:   |                   |
| Totals (for office use)  |                   |

| <b>SOCIAL AND EMOTIONAL DEVELOPMENT</b>                          | <b>TIME SPENT</b> |
|--|-------------------|
| Play a game with the family ( <i>Candy Land, Hi Ho Cheerio</i> ) |                   |
| Look at family pictures. Discuss changes in family members.      |                   |
| Others/Comments:   |                   |
| Totals (for office use)  |                   |

|   |
|---|
| <p>For office staff use:</p> <p style="text-align: center;">Total Time _____</p> <p style="text-align: center;">Staff Signature _____</p> |
|---|