Akiva School admissions@akivaschool.com Fax: (514) 939-2430 Emmanuel Christian School admissions@emmanuelcs.ca

JPPS Elementary mstein@jpps.ca Fax: 514-731-6458

Lower Canada College admissions@lcc.ca Fax: 514-482-0195

Miss Edgar's & Miss Cramp's admissions@ecs.qc.ca Fax: 514-935-1099

St. George's School of Montreal admissions@stgeorges.qc.ca Fax: 514-933-3621

Selwyn House School gervaisn@selwyn.ca Fax: 514-932-8776

Talmud Torah Elementary School admissions@azrieli-tth.ca Fax: 514-739-5280

The Priory School admissions@priory.qc.ca Fax: 514-935-1428

The Study admissions@thestudy.qc.ca



COMMON CONFIDENTIAL PORTRAIT OF DEVELOPMENT FORM

Pre-Kindergarten & Kindergarten

The listed schools are members of the Quebec Association of Independent Schools (QAIS), an organization of English elementary and secondary not-for-profit independent schools that actively promote innovation, collaboration and educational excellence. The listed schools have worked together to develop and distribute this form to reduce unnecessary duplication of information, and they encourage the use of this questionnaire. The information provided allows the school to become more familiar with your child during the admission process. Note that the completed form is made available only to the members of the admission committee of the school. If your child's educator cannot complete the form, please advise the school of the circumstances.

Fill in the information below and give this form to an educator who has taught your child recently. The educator should email or fax a copy to each of the schools to which you are applying for admission.

Section to be com	pleted by	y the	parent:
-------------------	-----------	-------	---------

Child's Name: First/	Middle/Last Applying to: Pre-Kindergarten Kindergarten				
Child's First Language:					
Present Daycare or School:	Present Daycare or School Address:				
Present Daycare or School Phon	e: Language of Instruction:				
I waive my right to access the completed Confidential School Report form for the child listed above.					
Signature:	Date:				

Section to be completed by educator:

We appreciate your cooperation in completing this form. It provides one way of getting to know the child and is reviewed with the full awareness that young children are constantly changing and developing.

Social-Emotional Development	Exceeds Expectations	Age Appropriate	Needs Development	No Basis for Judgment
Forms friendships				
Demonstrates concern for others				
Shares and takes turns				
Negotiates conflict in a democratic way				
Is comfortable with adults				
Respects classroom routines				
Responds positively to constructive criticism				
Transitions well between activities				
Initiates play activities				
Plays alone productively				
Works cooperatively				
Completes tasks				
Pretend plays				
Participates in teacher-directed activities				
Has the ability to express needs				
Exhibits self-control				
Is polite				

Language Development	Exceeds Expectations	Age Appropriate	Needs Development	No Basis for Judgment
Looks at speaker when spoken to				
Participates in group discussions				
Listens in a group				
Responds to non-verbal messages				
Asks questions				
Answers questions				
Expresses ideas well				
Beginning reading skills: Recognizes some letters and associates them with their sounds				
Beginning writing skills: Writes the letters of some letter sounds				

Section to be completed by educator:

Motor Development	Exceeds Expectations	Age Appropriate	Needs Development	No Basis for Judgment
Holds pen/pencil using correct grip				
Uses scissors appropriately				
Dresses / undresses independently				
Eats using utensils				
Climbs stairs up and down				
Runs avoiding obstacles				
Enjoys feeling different tools & textures				
			•	•

Cognitive Development	Exceeds Expectations	Age Appropriate	Needs Development	No Basis for Judgment
Follows 3-step directions				
Concentrates long enough to complete a task				
Makes predictions				
Solves guessing games / riddles				
Follows the rules of a simple game				
Sorts objects by category				
Matches quantities to numerals				

Eats using utensits			Sorts objects by category		
Climbs stairs up and down			Matches quantities to numerals		
Runs avoiding obstacles				! !	
Enjoys feeling different tools & textures					
J.J					
What are the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind to the first three words that come to mind the first three words that come to the first three words three words three words the first three words three word	-				
Has special support, evaluative screening or thera ☐ Yes ☐ No	py (e.g., teacher's a	de, speech therapy, occ	upational therapy, etc.) ever been reco	ommen	ded?
If yes, please provide details.					
Was the recommendation followed? ☐ Yes ☐ No					
If you wish to make any further comment, or add please do so in this space:	any information ab	out the applicant that yo	ou think would help the admissions of	ice,	
QAIS schools provide an academically challenging Given your knowledge of this child, would you rec			rricular activities.		
☐ Most strongly ☐ Strongly	☐ Yes	, with reservation	☐ Not at all		
Your name in block letters:		First/Last			
Position:	Leng		wn this child:		_
Signature:		Date:			_