

**Canton Union School District #66**  
**Application for Early Entrance to Kindergarten**

Please Print

Student Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Gender: Female \_\_\_\_\_ Male \_\_\_\_\_ Date of Birth (Must be five before October 31st) \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address (Number/Street/City/State): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Preferred method of contact: \_\_\_\_\_

Student has identified individual education needs: IEP \_\_\_\_\_ ELL \_\_\_\_\_ 504 Plan \_\_\_\_\_

Describe student special needs/accommodations:

List Preschool or Kindergarten Experience:

Name of school: \_\_\_\_\_ City \_\_\_\_\_

Name of school: \_\_\_\_\_ City \_\_\_\_\_

School child will be attended if admitted: \_\_\_\_\_

**CONFIDENTIAL – PARENT/GUARDIAN QUESTIONNAIRE SECTION**

Directions: Please answer each question below. If additional space is needed, please write on an additional sheet of paper.

1. Why do you think your child should be considered for early entrance to kindergarten?
  
  
  
  
  
  
  
  
  
  
2. Describe any behaviors or accomplishments that demonstrate your child has accelerated (advanced) early development.
  
  
  
  
  
  
  
  
  
  
3. How does your child handle new situations or unfamiliar experiences?

4. Describe how your child reacts to frustration or handles conflicts with others.
5. Describe chores and tasks your child does at home on their own.
6. How does your child interact with other children? Please explain and consider whether or not your child shares, takes turns and cooperates with peers?
7. What do you see as possible advantages and disadvantages of entering kindergarten a year early?

Please enclose:

Signed and Completed Application

Copy of certified birth certificate

Mail to: Canton Union School District #66    Attn: Jason Parsons    20 W. Walnut St.    Canton, IL 61520

Signature of Parent/Guardian: \_\_\_\_\_ Date \_\_\_\_\_