

Preschool Assessment Form

for 3 Year Old

Child's Name: _____

Date of Birth: _____

Assessment Date: _____

Teacher/Assessor Name: _____

Developmental Milestones:

- Speaks in short sentences
- Recognizes shapes and colors
- Plays well with others
- Walks and runs steadily
- Understands basic instructions

Cognitive Skills Assessment:

Can the child identify basic objects and their use?

- Yes
- No

Does the child show curiosity in exploring new activities?

- Yes
- No

Motor Skills Assessment:

Gross Motor Skills: _____

Fine Motor Skills: _____

Social and Emotional Development:

- Demonstrates comfort in group activities

- Displays empathy towards peers
- Manages transitions smoothly

Areas for Improvement:

Teacher Comments:

Parent Acknowledgment:

Signature: _____ **Date:** _____