



HOLY FAMILY ROMAN CATHOLIC
SEPARATE SCHOOL DIVISION NO. 140

5151 APPENDIX 1

PRE-KINDERGARTEN SELECTION CRITERIA FORM

Child's Name: _____

D.O.B _____

Age: _____

Criteria	Comments
• Low income/poverty	
• Single Parent	
• Divorced/separated family	
• Teen Parent	
• Family abuse/neglect	
• Alcohol/drug abuse	
• Mother/father has less than high school education	
• Mother/father mental health concerns	
• Family isolation - not involved in the community, little or no contact with other children	
• EAL – what language is spoken at home?	
• Frequent parent absence	
• Parenting skills	
• Referred by partner agency (if so which agency and how are they involved)	
• Communication/language delays/difficulties	
• Social/emotional/Behavioral concerns	
• Motor Skills delays (fine/gross motor)	
• Physical Health problems	
• Family Crisis	
• Level of independence with toileting or feeding themselves	
• Child's access to additional learning opportunities (e.g. attends high quality child care, attends family center, literacy/library programs)	
• Family commitment to the program	
• Siblings have attended Pre-K program	
• Plans to continue in HF school division	
• Catholic	YES or No

Placement in Pre-K _____

Waitlist _____