

Facility Name: _____
Facility License Number: _____
Director's Name: _____

This plan is for transition to kindergarten in the year 20 \_\_\_\_\_

**To Be Completed by Director and Elementary Principal**

(Complete Page 1 of this form for *each* elementary school.)

We have discussed and agreed upon the following activities to support transition for the rising kindergarteners' transition. (Check all activities that apply.)	
<input type="checkbox"/> Annual joint meeting of early childhood teachers, elementary principal, and kindergarten teachers	
<input type="checkbox"/> Annual parent orientation with principal and kindergarten teachers in attendance	
<input type="checkbox"/> Annual field trip for rising kindergarteners to kindergarten	
<input type="checkbox"/> "Going to Kindergarten" portfolios will be prepared by early childhood teachers and reviewed by kindergarten teachers	
_____	_____
Director*	Principal*
	_____
	Elementary School
_____	_____
Date	Date
* Required signatures	

**To Be Completed by Director**

Choose some or all of the following activities.  
Check each task as completed and enter dates:

<b>Transition Activities</b>	<b>Date</b>
<input type="checkbox"/> Annual in-service workshop on transition scheduled	_____
<input type="checkbox"/> Annual joint meeting of early childhood director and teachers, elementary principal, and kindergarten teachers	_____
<input type="checkbox"/> Principal and Kindergarten teachers invited <input type="checkbox"/> Refreshments, etc., for meeting ready <input type="checkbox"/> Agenda ready <input type="checkbox"/> Sign-in sheet ready <input type="checkbox"/> Annual field trip plan completed <input type="checkbox"/> Agenda, sign-in sheet, field trip plan filed with this transition plan	
<input type="checkbox"/> Annual parent orientation meeting	_____
<input type="checkbox"/> Principal and Kindergarten teachers invited <input type="checkbox"/> Agenda ready <input type="checkbox"/> Sign-in sheet ready <input type="checkbox"/> Agenda, sign-in sheet filed with this transition plan	
<input type="checkbox"/> Annual field trip for rising kindergarteners to kindergarten	_____
<input type="checkbox"/> "Going to Kindergarten" unit materials ready <input type="checkbox"/> Trip schedule and activity plan ready and filed with this transition plan <input type="checkbox"/> Permission slips ready <input type="checkbox"/> Permissions slips completed <input type="checkbox"/> Transportation plan ready <input type="checkbox"/> Trip confirmed with kindergarten teachers	
<input type="checkbox"/> "Going to Kindergarten" portfolios	_____
<input type="checkbox"/> Copies of spring developmental checklists <input type="checkbox"/> Drawing sample <input type="checkbox"/> Dictated writing sample <input type="checkbox"/> Portfolios sent home to parents	
<input type="checkbox"/> Other Activity: _____	
<input type="checkbox"/> Other Activity: _____	