



Bolton Public Schools will be holding a screening for preschool children

Who can participate?

- 1. Do you have questions about your child's development? If so, you can bring your child to the screening. This is just a screening, not an evaluation. We screen for possible developmental delays and will determine whether your child is functioning within age appropriate limits or is in need of further evaluation.
- 2. Would you like your child to be considered as a peer model for the 2023-2024 preschool class? In order to be considered as a possible peer model your child will need to be screened. We are looking for 3 and 4 year olds who demonstrate age appropriate communication, social, play, and motor skills. Children must turn 3 years of age before the first day of school and must be Bolton residents.

How is the screening conducted?

The screening takes about 30 minutes. This year the screening will take place outside. While you complete a developmental history in your car, your child will play with members of the Preschool Team. Through play, the Preschool Team will be looking to gather information regarding your child's communication, social, play, and motor skills.

When and where does the screening take place?

Tuesday, April 4 (**rain date**: Thursday, April 6) on the Bolton Center School grounds (please park at the Senior Center and we will meet you there). Screening times are: 12:30-1:00, 1:15-1:45, and 2:00-2:30.

How can I sign my child up for this screening?

If you are interested in having your preschool child screened, please complete and return the <u>application</u> by **March 28**, **2023**. (available on the district website: **www.boltonpublicschools.com**). We will get back to you with a time. Please email or mail your completed application to:

Bgoldsnider@boltonct.org or

Beth Goldsnider, Director of H.R. and Student Support Services
Bolton Board of Education
72 Brandy St. Bolton, CT 06043

Preschool Screening Application

Please complete this form and submit it by March 28, 2023.

Applications can be emailed to bgoldsnider@boltonct.org or mailed to Beth Goldsnider at 72 Brandy St. Bolton, CT 06043

Child's Name:
Date of Birth:
Address:
Parents/Guardians:
Phone Number:
Email Address (for confirmation of screening time):
Reason for Screening: Typical Peer Model or Child Find
If you would like your child screened for Child Find please check area(s) of concern: speech/language motor skills social skills learning - i.e., : memory, colors and shapes, etc.
Screening Date: Please circle your preferred time; we will confirm the scheduled time with you. Tuesday, April 4: 12:30, 1:15, or 2:00 Rain Date: Thursday, April 6: 12:30, 1:15, or 2:00

Please do NOT come to the screening if your child or family members are exhibiting any COVID-19 symptoms.

Disclaimer: There will be no make-up screenings.