

TRANSITION RECORD

Naíscoil: _____

Name of Child: _____

Date of Birth: _____

Attendance (*until end of May*): _____

Punctuality: Good

Fair

Needs Improvement

EXPLANATION OF CODES

1. Has achieved this competency
2. Making reasonable progress towards the competency
3. Beginning to make progress towards the competency



PERSONAL, SOCIAL AND EMOTIONAL DEVELOPMENT

	1	2	3
Can cope with personal needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relates well to other children & asks for help	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shares and takes turns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relates well to staff & asks for help	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Co-operates with staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shows an eagerness to explore/play/learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engages in co-operative play	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regulates feelings & shows empathy to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows simple rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Behaves appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PHYSICAL DEVELOPMENT

	1	2	3
Moves with confidence & is well co-ordinated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has good hand/eye co-ordination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good balance and spatial awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has good manual control (using equipment/resources)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has developed gross motor skills (climbing/jumping etc...)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has developed fine motor skills (threading/pencils/scissors etc...)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enjoys & engages in physical play indoors/outdoors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



THINKING & LEARNING SKILLS

	1	2	3
Shows self-organisation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engages positively with new experiences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can talk about own experiences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shows enthusiasm and interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is inquisitive and curious	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseveres in a task	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listens well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asks relevant questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shows sustained concentration in:			
	Individual activity <input type="checkbox"/>	Group activity <input type="checkbox"/>	

COMMUNICATION SKILLS

(judged on the basis of 1st language competence)

Social use of language with staff:

Talks freely Confident Initiates talk Shy

Social use of language with other pupils:

Talks freely Confident Initiates talk Shy

Purposes for which pupil uses 1st language:

Expresses needs/wants Protects self-interest Criticises others

Justifies behaviour or claims Directs actions of others Asks questions

Collaborates with others Makes observations Makes predictions

Recalls events Describes events

Other comments:

COMPETENCE IN IRISH

	1	2	3
Understands instructional, organisation/social language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands common questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands high frequency key words	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participates in songs, stories, rhymes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Repeats songs, stories, rhymes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses basic routine social language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gives single word or single phrase answers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inserts single words or phrases in Irish in English communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependence on non-language clues:			
	Significant <input type="checkbox"/>	Non-significant <input type="checkbox"/>	

PRE-READING SKILLS

	1	2	3
Shows an interest in books	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handles books appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can retell a story	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Likes stories, rhymes, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognises own name	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shows awareness that print carries meaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shows interest in letter names/sounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>







PRE-WRITING SKILLS

Development of Emergent Writing

Shows a preference for: Right hand Left hand Both hands

Writes: Mark making in a manner that mimics writing

- | | |
|--|--|
| Scribbles <input type="checkbox"/> | Displays writing behaviour <input type="checkbox"/> |
| Writes from left to right <input type="checkbox"/> | Writes strings of letters in word-like clusters <input type="checkbox"/> |
| Writes initial letter of own name <input type="checkbox"/> | Writes some recognisable letters <input type="checkbox"/> |
| Writes or copies own name <input type="checkbox"/> | Copies some whole letters <input type="checkbox"/> |
| Copies some whole words <input type="checkbox"/> | Writes some recognisable words <input type="checkbox"/> |

Scribbles	Early symbols	Detail	Advanced details
			

THE ARTS

	1	2	3
Freely accesses materials and enjoys taking part in creative experiences/ activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drawings, paintings and models are becoming more detailed and elaborate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enjoys listening to and participating in music-related experiences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has a good sense of rhythm and can respond to steady beat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enjoys and participates in role-play and imaginative experiences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Values his/her own work and the work of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Expresses ideas and communicates feelings through creative, music and drama experiences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has developed manipulative skills by handling appropriate tools and instruments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

THE WORLD AROUND US

	1	2	3
Can talk about him/herself, family, the pre-school setting and the wider environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shows care for living things and the environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses senses to investigate and describe everyday objects and events and make simple predictions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can identify a variety of familiar sounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asks a variety of questions to find out why things happen and how things work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands the roles/jobs of familiar people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can talk about the seasons, different weather and change over time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knows the names of various body parts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has a good understanding of keeping safe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



EARLY-MATHEMATICAL SKILLS

	1	2	3
Understands simple mathematical vocabulary <i>e.g big, small, too much</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completes a simple sequence or pattern	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sorts and categorises things into groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Matches, selects and names colours and shapes

Red	<input type="checkbox"/>	Yellow	<input type="checkbox"/>	Green	<input type="checkbox"/>	Blue	<input type="checkbox"/>
Square	<input type="checkbox"/>	Circle	<input type="checkbox"/>	Rectangle	<input type="checkbox"/>	Triangle	<input type="checkbox"/>

Counts correctly in sequence: 1-5 6-10

Counts groups correctly in sequence: 1-5 6-10

Makes groups of:

1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
6 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>	10 <input type="checkbox"/>

Teacher/Leader signature:	Date: / /
Principal's signature:	Date: / /
Comments:	
Parent/Gaurdian signature:	Date: / /
Comments:	

