



## Early Childhood Intervention Program Lottery Form



*Please print clearly or type this form.*

**Completed forms must be HAND DELIVERED to the Parent Information Center (42 Prescott Street) by NOON on Thursday, February 28, 2019.**

To be completed by SPS Staff: Lottery # \_\_\_\_\_

Student's Name \_\_\_\_\_

DOB \_\_\_\_\_ Gender -  Male  Female

**Students must be 3 years old by February 28, 2019 and not 4 years old by August 31, 2019**

Student's Address \_\_\_\_\_  
Street Zip Code

Home Phone \_\_\_\_\_ Home Language: \_\_\_\_\_

Do you or your child need an interpreter for the screening?  If Yes  Parent  Student  
 No

Parent/Guardian Names \_\_\_\_\_

Work # \_\_\_\_\_ Cell # \_\_\_\_\_

Email address \_\_\_\_\_

- I certify that my child is an actual resident of Somerville, Massachusetts.
- My child is not receiving any special education services.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

*Children not selected for the program will be placed on a waitlist.*



Dear Parent,

The following check-list is for skills that are developmentally appropriate for a student entering the ECIP classroom. Ideally, a Typically Developing Peer will demonstrate many of these skills although it is not an expectation that they possess them all. Please circle yes or no for each item and sign the form as part of the ECIP Typically Developing Peers application process. After the initial screening, all children are accepted on a provisional basis and will be reviewed by October 15<sup>th</sup> to ascertain appropriateness for the program. **Thank You**

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

**Communication Domain:**

- Points to at least 5 major body parts when asked (e.g. nose, mouth, hands, etc.) yes or no
- Follows instructions with two actions (Go into the kitchen and bring me the crayons.) yes or no
- Sits and listens to a story for at least 10 minutes. yes or no
- Says first name when asked. yes or no
- Identifies and names 3-5 common colors. yes or no
- Asks questions beginning with who and why. yes or no
- Identifies one or more alphabet letters as letters and distinguishes them from numbers yes or no

**Daily Living Skills Domain:**

- Is toilet trained during the day. yes or no
- Puts on a coat or sweater; pulls up pants. yes or no
- Feeds self; drinks from cup. yes or no

**Socialization Domain:**

- Demonstrates friendship-seeking behavior with others the same age (ex: "Do you want to play?") yes or no
- Answers when familiar adult makes small talk (ex: "How are you?") yes or no
- Shares toys or possessions when asked. yes or no
- Plays cooperatively with one or more children. yes or no

**Coping Skills:**

- Changes easily from one home activity to another. yes or no
- Says 'thank you' when given something. yes or no

**Motor Skills Domain:**

- Runs smoothly without falling. yes or no
- Throws ball. yes or no
- Walks up stairs, using alternate feet. yes or no
- Picks up small objects with thumb and finger. yes or no
- Completes simple puzzle of at least two pieces. yes or no

**Other Behaviors:**

- Can separate easily from parent. yes or no
- Makes eye contact. yes or no
- Can deal with disappointment appropriately (no temper tantrums.) yes or no
- Plays appropriately—shares and changes to new activity easily. yes or no
- Understands to stay with adults inside and outdoors (does not run away.) yes or no

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

*"The Somerville Public Schools does not exclude, deny benefits to, or otherwise discriminate against any person on the basis of race, color, national origin, religion, gender, gender expression or identity, sexual orientation, marital status, military status, disability or age in admission to, participation in, or receipt of the services and benefits under the Early Childhood Intervention Program."*