

**2025-2026**

**Prior Educational Experience of**

**Incoming Kindergarten Students**

**Survey**

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_ No, my child did not participate in a 4-year-old preschool program.**

**\_\_\_\_\_ Yes, my child participated in a 4-year-old preschool program.**

 Preschool Program Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Type of Preschool Program \_\_\_\_\_ Licensed Child Care Center

 \_\_\_\_\_ Family/Friend Care

 \_\_\_\_\_ Head Start

 \_\_\_\_\_ Home

 \_\_\_\_\_ Pre-K Public

 \_\_\_\_\_ Pre-K Private

Private provider with a small group of students, not a licensed childcare center.