[Insert DATE]

Dear Parent/Guardian,

[**INSERT** **PRESCHOOL NAME**] is committed to supporting you and your child during the transition from preschool to kindergarten. We know the transition process is an important time in your child’s life. We want to provide your family with information that will ease this process.

Through a county wide collaboration with the First Things First Initiative of Summit County, our preschool program will be working with your child’s receiving kindergarten teacher to ensure they are ready to support your child next school year. As part of the process, our team will provide a summary of your child’s development and skills acquired during preschool to provide information that will continue to support your child’s progress as kindergarten begins.

Your child’s kindergarten program will receive a paper or online copy of the Summit County Transition Skills Summary Sheet through the support of a county wide team working with preschool programs. Your child’s preschool teacher will also provide you with a copy of the summary sheet as well.

Please complete and return the bottom portion of this letter to your child’s teacher by [**INSERT DATE**]. If you have any questions or concerns you may contact your child’s preschool teacher or [YOUR PRESCHOOL NAME].

*I give permission for the Summit County Transition Skills Summary (TSS) Results to be shared with my child’s receiving kindergarten program in the school district(s) checked below. (You can check more than one district if you are unsure of where your child will attend kindergarten.)*

|  |  |  |
| --- | --- | --- |
| Akron Public Schools | Hudson City Schools | Springfield Local Schools |
| Barberton City Schools | Manchester Local Schools | Stow-Munroe Falls City Schools |
| Copley-Fairlawn City Schools | Mogadore Local Schools | Tallmadge City Schools |
| Coventry Local Schools | Nordonia City Schools | Twinsburg City Schools |
| Cuyahoga Falls City Schools | Norton City Schools | Woodridge Local Schools |
| Green Local Schools | Revere Local Schools |  |

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**Print Child’s Full Name** (*Please write your child’s name as it will appear on their kindergarten registration*)

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

**Parent/Guardian Signature Date**

**Check the box of the ethnicity that best describes your child:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| American Indian/  Alaska Native | Asian | Black/  African American | Hispanic | Multiracial | Pacific Islander | White |