

CIRCLE Progress Monitoring System

Physical Health and Development Checklist

Name:	Birth Date:	
School:	Teacher:	
BOY Date:	MOY Date:	EOY Date:

Instructions: Please consider your observations of children's behaviors within the classroom and school to complete this checklist. Read each item and evaluate whether a behavior is:

- (1) **Emerging** – the child never or rarely demonstrates the behavior
- (2) **Developing** – the child sometimes demonstrates the behavior, but it inconsistent or requires assistance
- (3) **Proficient** – the child consistently demonstrates the behavior

Fine and Visual Motor			
The child...	BOY	MOY	EOY
Is able to pick up small objects (e.g., beans, rice, raisins) easily using a <i>pincer grasp</i> . The pincer grasp occurs when the child uses the index finger and thumb to grasp objects.	□ E □ □ □ P	□ E □ □ □ P	□ E □ □ □ P
Is able to complete a range of activities associated with <i>daily living</i> independently (e.g., uses utensils or pours independently).	□ E □ □ □ P	□ E □ □ □ P	□ E □ □ □ P
Is able to participate successfully in classroom activities requiring <i>fine motor</i> dexterity (e.g., completing inset puzzles, linking cubes, building a block tower of 6-8 blocks, and unscrewing jars).	□ E □ □ □ P	□ E □ □ □ P	□ E □ □ □ P
Is able to <i>draw</i> some recognizable shapes or designs (e.g., smiley faces, stick figures).	□ E □ □ □ P	□ E □ □ □ P	□ E □ □ □ P

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Gross Motor			
The child...	BOY	MOY	EOY
<i>Note: Many of these items can be observed during group activities by asking all students to complete activities (e.g., Let's all hop on one foot.).</i>			
Is able to run in a fluid manner with changes in direction and speed.	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P
Is able to balance independently on one foot with no assistance for at least 3 seconds.	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P
Is able to hop on each foot for at least two hops.	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P
Is able to catch a small ball (e.g., tennis ball) from a distance of at least 4 feet. Note: Catching balls by pulling the ball close to the body or forming a basket with cupped hands is acceptable.	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P
Is able to successfully utilize a variety of outdoor play equipment in an appropriate manner (e.g., uses slides/swings, pedal tricycles).	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P
Health Status			
The child...	BOY	MOY	EOY
Is able to distinguish between healthy and less healthy food types (e.g., healthy food that can be eaten any time and food that is acceptable for special occasions).	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P
Demonstrates an understanding of <i>hygiene practices</i> (e.g., hand washing, covering mouth when coughing). <i>Note:</i> This item evaluates an understanding of good hygiene practices, but does not imply that children must use practices consistently to receive a score of Proficient.	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P
Demonstrates an understanding of <i>safety rules</i> for the classroom, playground, and community (e.g., no running in the classroom, not walking up or down the slide, and looking both ways prior to crossing the street). <i>Note:</i> This item evaluates an understanding of safety rules and does not imply that children must follow all safety rules consistently to receive a score of Proficient.	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P	<input type="checkbox"/> E <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> P