

October 16, 2019

Dear Families:

William Halley Elementary School is pleased to announce that we will continue to have community peers in our special education preschool program. These community peers offer opportunities for our students to participate in integration activities with typically developing peers. This involves teaching preschoolers with and without delays in the same classroom. It provides young children with a more stimulating environment, teaches skills for coping with different situations, and provides the opportunity to learn appropriate social skills.

All children learn through their play. Intellectual growth occurs in a social context, influenced strongly by the quality of social interactions. The goal of this program is to encourage active learning and promote social interaction and acceptance through shared experiences between the community peers and our preschoolers with special needs.

Our program will invite a limited number of community peers, who are age 3-5 years, to join our classrooms and participate in our daily preschool activities. The children from the community will have the opportunity to make new friends and share experiences with current early childhood special education students. Our students will, in turn, benefit from being with community peers who can model appropriate language, motor, and social skills.

Our interest meeting will be Tuesday, November 5, 2019, 10:00am in room 116. Please bring your child.

Sincerely,

Linda Lovitt Roberts

Preschool Teacher

Peer Model Interest Form

Due by Tuesday, November 5, 2019

Child's name: _____

Sex: M / F Birth Date: _____

(must be at least 3 years old by September 30 of school year)

Parent's Name(s): _____

Address: _____

Home #: _____

Work/Cell #: _____

Email: _____

Are you a member of the faculty/staff at Halley?	YES	
NO		
Are you a resident in Fairfax County?	YES	NO
Is the elementary school your neighborhood school?	YES	NO
Is the child a sibling of a current preschool special education student?	YES	NO

Child Profile

Child's Name: _____

Nickname: _____

Birth Date: _____

My child is toilet-trained: YES NO

My child's strengths are:

Does your child have preschool experience? Please describe.

What do you hope for your child to gain from this experience?

How do you feel your child interacts with other children?

How does your child respond to new children and new environments?

How does your child react when he/she is asked to do something they do not wish to do?

