



## EDUCATIONAL SERVICE UNIT 9

1117 E. South Street, P.O. Box 2047, Hastings, Nebraska 68902-2047  
(402) 463-5611 FAX (402) 463-9555

To: School Age Personnel for the \_\_\_\_\_ School District  
May include: Kindergarten Teacher  
Speech & Language Pathologist  
Resource Teacher  
Other:

Date: \_\_\_\_\_

Re: Transitioning students from a Preschool Program into a School Age Program

From: \_\_\_\_\_ at \_\_\_\_\_  
(ECSES) (Preschool Classroom)

As part of a successful transition from a preschool program into a school age program we would like to invite the school age personnel to observe the following students in their preschool setting:

Student	P/S Program	Class Times	Days Attending

Please discuss scheduling a visit with your school administrator and school team.

Contact the Early Childhood Specialist at \_\_\_\_\_ to schedule a visit.

Cc: School District Administrator  
Preschool Supervisor  
Speech & Language Pathologist Supervisor  
Teacher Consultant

PS-02