

CHILD'S FAMILY INFORMATION

Our teachers would appreciate knowing about your child and family so that they may be aware of your child's unique needs and circumstances.

Child's Name _____ Nickname _____

Sex _____ First _____ Last _____ Birth Date _____

Father's Name _____ Mother's Name _____

Home Phone _____ Cell Phone _____

Names and birthdates of siblings _____

Adults who live in the home with your child _____

Please list the names and kinds of pets in your home _____

My child's favorite activities include _____

My child's least favorite activities include _____

My child's strengths include _____

Does your child have a job at home? _____

Does your child have any fears? _____

Does your child have a security item? _____

My child needs help with _____

As teachers you can help my child most by _____

Has your child experienced any emotional distress in the recent past? _____

Are there any learning or behavioral difficulties that you, as a parent, think your child may be exhibiting? _____

Is your child receiving any special services from County agencies or from a private source? _____

What opportunities has your child had to play with other children? _____

This year I would like my child to _____

I would like you to know that _____

We are required by licensing regulations to obtain the following information on previous enrollment in school or daycare.

Is this your child's first year in school? _____ If no, please give the name and location of previous school and number of years attended _____

Has your child ever been with a caregiver during the day? _____ Please give the caregiver's name _____

If your child is currently with a caregiver, please indicate the number of hours _____

Care is provided at _____ How many other children are with the caregiver? _____