

**Child Information form-** please use the back of this form for additional space

Child's Name \_\_\_\_\_ Parents \_\_\_\_\_

Birth Date \_\_\_\_\_

Siblings and ages:

1. Has your child had group play experiences and experiences away from parents (ie nursery, babysitter, daycare)?
  
2. Does your child have a favorite stuffed animal or blanket?
  
3. What is your child's favorite thing to do, place to go, or people to visit?
  
4. Do you have extended family who live close to you? Who?
  
5. Does your child have any food or air born allergies?
  
6. What time does your child usually go to bed? Get up?
  
7. What is your child's favorite:  
activity:  
color:  
music/movie:
  
8. Does your child have any speech problems that you are aware of?
  
9. What method of discipline/ behavior control do you use at home?
  
10. How would you describe your child? What are your child's strengths?
  
11. Are there any other special circumstances or information that you would like your child's teacher to know?

(continued on back)

12. What goals do you have for your child this year?
  
13. What do you most want your child to learn in our program?
  
14. Are there any special traditions, celebrations, or songs that are especially important to your family/child?
  
15. How would you like us to support your child's heritage and culture at school?
  
16. Would you be willing to share something about your culture with our program?
  
17. What are **your** talents and hobbies? What is your occupation? Would you be willing to share your talents with us in the classroom for special projects?
  
18. When is the best time to contact you and by what method (ie phone, e-mail, before/after class)?