

KiddieKlub

(circle room) Toddler/Preschool/PreK Information Questionnaire

Name of Child: _____

Date of Birth: _____

Male or Female (circle one)

What does your child prefer to be called? (nickname) _____

Mother's name _____

Father's name _____

Personal/Family Environment

1. Does your child have any allergies or food accommodations?

2. Who does the child live with? (Mom, Dad, Both or Other)

Are there any siblings?

Names

1) _____ Age _____

2) _____ Age _____

3) _____ Age _____

3. Besides English, are there other languages spoken at home?

4. Has your child attended a childcare/preschool before?

- If yes, for how long?

Developmental History

1. Was your child premature at birth?

2. At what age was your child:

Sitting alone?

Walking alone?

Speaking Complete Sentences?

Potty Trained?

3. If not potty trained, Are you in the process of potty training?
4. Are they able to adequately clean him/herself after toileting?
5. Can your child...
 - Feed him/herself using a spoon and/or fork?
 - Wash and dry his/her own hands?
 - Dress him/herself with assistance?
 - Express his/her thoughts easily?
6. Is your child
 - Sleeping with a pacifier?
 - Using a pacifier during the day?
 - Taking rest or nap daily?
 - If yes, approximately how long? At what time?
7. Does your child have any special learning needs?
 - If yes, please explain
8. Have there been any major changes in your child's life that may be affecting or have affected your child's growth or development? (death, divorce, a recent move, serious illness, etc.)
9. Please describe your child's personality (shy, easily excited, etc...)
10. What are your child's favorite activities or toys? How does your child spend his/her free time?
11. What are your educational goals for your child?
12. What do you need us to know about your child that we haven't asked?