

Please take a few minutes to answer the following questions about your child. Your answers will help us get to know you and your family a little better.

Q: What would you most like us to know about your child? Please include any special concerns we should know about as we care for your child.

A:

Q: How is your child comforted best?

A:

Q: Please provide any information that you can with regard to your child's eating and sleeping habits. (i.e. How does your child like to be put to sleep? Does your child have any special dietary needs?)

A:

Q: Tell me about your expectations for potty training.

A:

Q: How does your child communicate best? (i.e. signs, words, sounds)

A:

Q: Does your child have any allergies (food, medication, seasonal, etc.)?

A:

Q: What do you most want your child to learn in our class?

A:

Q: What does your child enjoy doing at home?

A:

Q: How would you like to participate in the program?

A:

Q: Are there any special traditions, celebrations, stories or songs that are especially important to your family and your child?

A: