



Child Profile

Child's Name: _____

Birthday: _____

This profile will stay with your child. As your child grows and develops, changes should be noted or added to this form to keep your child's teachers in touch with the growth and development your child has made. We need your input on any changes taking place outside of school that may have an affect on your child while in our care. Thank you for helping us make our school the best we can be.

1. Has your child had previous preschool experience? Yes No
If so, please elaborate:

2. What would you like most for your child to experience with us?

3. What does your child most enjoy doing?

4. Does your child have any fears?

5. Do you consider your child shy or outgoing?

6. What are your child's favorite toys?

7. About what things does your child express the most curiosity?

8. Does your child play well with other children? Yes No

9. List the names and ages of other children in your family.

10. What words are spoke in your home for toileting?

11. Does your child take a nap? Yes No

12. Does your child need a favorite item (such as a blanket or stuffed animal) for nap?

Yes No

13. How many hours of sleep does your child usually receive at night?

14. Do you have a special interest or hobby you would like to share with your child?

15. Are you available to help us with the field trips or other special events?

Yes

No

16. Who, besides the immediate family, resides in the home?

17. Does anyone else care for your children?

Yes

No

If so, then whom? _____

18. What language is spoken in your home?

Parent's Signature

Date