

## **Child Profile**

For children ages 1 and up A new form is required with each classroom transition

This profile will help your child's teacher get to know your child better. Your input will also help with your child's adjustment to the new classroom.

Child's Full Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/

1. List any nicknames your child may have. \_\_\_\_\_

2. Has your child had previous group care experiences? 
□ Yes □ No

3. What language(s) is spoken in your home?

- 4. List the names and ages of siblings.
- 5. Do you have pets at home?  $\Box$ Yes  $\Box$  No If yes, please list type of pet and name.
- 6. What words are spoken in your home to describe everyday things (I.e. toileting, nap, eat, play and outside)?

Parent/Guardian Signature

\_\_/\_\_\_/\_\_\_\_ Date