

# About Your Child

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

Date \_\_\_\_\_

1. What foods does your child especially like?

\_\_\_\_\_

2. Especially dislike?

\_\_\_\_\_

3. Favorite toys, games, activities?

\_\_\_\_\_

4. Is your child potty trained? \_\_\_\_\_ What words does your child use for toilet?

\_\_\_\_\_

5. How does your child express anger or frustration?

\_\_\_\_\_

6. Does your child have any special fears?

\_\_\_\_\_

7. When your child is upset, what helps to comfort him/her?

\_\_\_\_\_

8. How do you discipline your child?

\_\_\_\_\_

9. What are your child's sleeping habits? Special toy or blanket for nap?

\_\_\_\_\_

10. Any special family situations?

\_\_\_\_\_

11. Anticipated adjustment problems?

\_\_\_\_\_

12. Any disorders/developmental (slow or advanced) diagnosed or suspected?

\_\_\_\_\_

13. Previous childcare child has attended:

\_\_\_\_\_

14. Any problems at previous daycares?

\_\_\_\_\_

15. Expectations of Provider:

\_\_\_\_\_

\_\_\_\_\_

16. Would you like to share anything about your families' cultural background, traditions or interests? Which language does your family speak at home?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_