



Rocking Horse Preschool

Enrollment Questionnaire

Dear Parents:

Will you please take a few moments to answer the questions below? This will help us to get to know your child better. Thank You!

1) Your child's name (as you want them to be addressed in school): _____

2) Please list the names of people living in the same household as your child:

3) Has your child had preschool or play-group experience? If yes please provide name of school and how many years attended.

4) Does your child have any speech / hearing problems?

5) Does your child have any health problem or allergies we should be made aware of?

6) Does your child have any special interests?

7) What types of activities does your child like to participate in?

8) Is your child afraid of anything?

9) What skills has your child acquired?

(Please remember none of these skills are necessary for enrollment)

_____ Can say full name

_____ Knows the names of colors

_____ Can use the toilet themselves

_____ Likes to listen to stories

_____ Can button own clothing

_____ Can zip own clothing

_____ Has experience with crayons

_____ Has experience with scissors

10) Is there anything else you would like us to know about your child?

We are looking forward to a fun and exciting school year and getting to know you and your child better!

Mrs. Woods and Mrs. Leshner