





Please fill out this questionnaire so we may better understand your child.

8. Do you have any pets at home? What Kind? 9. Has your child stayed with other adults before?	child's hame	Chinis way brawer to s	
1. What time does your child go to bed at night?		Оате	
2. What time does your child wake up in the morning? 3. Will breakfast need to be served to your child? 4. Please list the foods your child enjoys most: *Breakfast *Lunch *Snack 5. List Foods that your child dislikes: 6. Does your child take naps? *How Long? *What time do they nap? 7. Does your child have any fears? Dogs? Storms? 8. Do you have any pets at home? What Kind? 9. Has your child stayed with other adults before?			to dien was an and respond
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9. Has your child stayed with other adults before?	7. Does your child have a	ny fears? Dogs? Storms?)
	8. Do you have any pets o	it home? What I	Kind?
.O. What are your child's favoriteplaythings, pets, books	9. Has your child stayed	with other adults before:	?
	0. What are your child's	favoriteplaythings, pet	s, books
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ndii biling? 11 so p	please describe
13. In what ways do you r	reassure or reward your child?
	stoG
14. In what ways do you r	respond to your child's negative behavior?
	Time was your child go to bed at night?
15. Do you have outstandi	ng concerns?
	d Tease list the foods your child enjoys most:
	nts that may help us to understand and care for your
	*Snack
	5. List Foods that your child dislikes:
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