

FAMILY INFORMATION QUESTIONNAIRE PRESCHOOL & PRE-K CHILDREN



Dear Parents,

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

Parent's Name: _____ and _____

Parent's Email: _____

Best method to reach you: Daytime: _____ Evening: _____

Child's Name _____ (as you want him/her called at school)

Birthday _____

1. Please list the names and ages of your child's brothers and sisters.
2. Who lives in the household other than the above mentioned family members?
3. What is the primary language spoken in your child's home?
4. Are there any special family arrangements, such as shared parenting, living in two homes, or custody specifications? Additional Details?
5. Are there any changes or transitions that your child has recently experienced or is experiencing? (new home, divorce, death of family member or pet)
6. Are there any cultural or religious practices of your family we should be aware of? (Dietary restrictions, clothing)

7. Has your child had preschool or playgroup experiences? (Please give name of school and number of years attended.)

8. Does your child have any difficulties with speech?

9. Does your child have any health problems or allergies?

10. Does your child have any special interests?

11. Is your child afraid of anything?

12. What responsibility does your child have at home?

13. What form of discipline do you use at home?

14. What skills has your child acquired?

_____ Knows birthday

_____ Can print full name

_____ Knows the names of colors

_____ Recognizes capital letters

_____ Likes to listen to stories

_____ Can zip own clothing

_____ Has experience with scissors

_____ Can say full name

_____ Counts to... (How far?)

_____ Can recognize numbers 0 to 10

_____ Recognizes lowercase letters

_____ Can button own clothing

_____ Has experience with crayons

15. What are your expectations of the school program? What specific things would you like to see happen this year?

16. Would you be interested in helping in the classroom? Is there a particular day and time that is best for you?

17. Does your family attend church? _____ If so, where does your family attend?
Do you attend Regularly _____ Occasionally _____ Rarely _____

18. Is there anything else that you would like to tell us about your child?

This will be an exciting year! We look forward to getting to know you and your child!