

NOAH'S ARK PRESCHOOL

1154 Great Plain Avenue Needham, MA 02492 781/449-2439

Developmental History and Background Information Returning Student 2018-2019

Regulations for licensed childcare/preschool facilities require this information to be on file to address the needs of children while in care.

Name of Child: _____ Date of Birth: _____

Development

Any speech difficulties? _____

Special needs? _____

Language(s) spoken at home: _____

Health History

Serious illnesses and/or hospitalizations over the past year? _____

Special physical conditions: _____

Allergies (i.e. Food Reactions, Medicines, Asthma, Hay Fever, Insect Bites): _____

Regular Medications: _____

Eating Habits

Any special characteristics or difficulties: _____

Toilet Habits

Is your child toilet trained (day)? _____

Does your child have accidents? _____

Sleeping Habits

Does your child become tired or nap during the day? _____

Describe any special characteristics or needs (difficulty falling asleep, wakeful at night, mood on waking, etc.): _____

Social Relationships

How would you describe your child: _____

Reaction to strangers: _____

Excessive difficulty separating from parents/caregiver: _____

Does your child enjoy playing with other children?: _____

Favorite toys and activities: _____

Fears (darkness, animals, etc): _____

What would you like your child to gain from his/her school experience this year?: _____

Additional Information:

Is there anything else we should know about your child? _____

Signature of Parent or Guardian: _____ Date: _____
