

Small Friends School Personal Information

In an effort to make your child's first days at Small Friends as successful and positive as possible, please take time to read and answer the questions below. Your open and honest responses will greatly enhance our ability to meet your child's interests, needs and personality as soon as s/he walks into the classroom. If there is anything you would like to speak with your child's teachers about prior to the start of the school year, please don't hesitate to contact us to schedule time to visit. Likewise, your child's teachers may contact you if they need clarification or have questions about the information you are providing.

Thank you for taking the time to fill this out. We look forward to seeing you and your child in September!

Family

Occupation: Mom _____ Dad _____

Siblings:

1. _____ D.O.B. _____

2. _____ D.O.B. _____

3. _____ D.O.B. _____

Child

Has your child had any group play experience? _____ Please describe: _____

Does your child have any fears? _____

Separation anxiety? _____

What are your child's passions/interests? _____

How would you describe your child's personality? _____

Has your child ever been evaluated or received a diagnosis in any of the following areas:

Behavioral/Emotional Challenges? _____ Developmental Delays? _____ Speech? _____

If yes, please explain: _____

How does your child respond to transitions? _____

How does your child respond to directions? _____

We *do not* require that children be potty trained. However, it is very helpful to us if you let us know where your child is in this process as we begin our year together. Is your child:

Not at all interested? _____ In pull-ups with some success? _____ Consistently using the toilet? _____

Is there anything else you would like us to know about your family or your child? _____

Thank you again for taking the time to complete this questionnaire. Your feedback is invaluable as we prepare for a successful transition into the school year!