

Getting Acquainted

Child's Name _____ Birth Date _____

What name do you want your child to be called and write? _____

Parents Names _____

Home Address _____

Email Address _____

Home Phone _____ Cell Phone (s) _____

Preferred Form of Communication email home phone cell phone

Siblings

Current Grade/Age

Is your child related to another child entering kindergarten? Yes____ No____
If yes, please list the first and last name of the relative. _____

Did your child attend preschool? _____ Where? _____
How many years did they attend preschool? _____

Are there any special considerations we should be aware of (health problems, allergies, changes in family situations, attitude, recent move, divorce)?

What are your child's favorite activities? _____

Tell me about your child's personality. _____

What are your expectations for kindergarten? What specific things would you like to see happen this year? _____

Are there any considerations to address when placing your child in a classroom? _____