

# Getting Acquainted

This information is confidential and is intended for your child's teacher to better understand your child.

Child's Name: \_\_\_\_\_  
Nickname: \_\_\_\_\_

DOB: \_\_\_\_\_  
Language Spoken: \_\_\_\_\_

## Parent Information

Mom's Name: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

Dad's Name: \_\_\_\_\_  
E-MailAddress: \_\_\_\_\_

## Daily Living

- Has your child previously attended an early childhood program?
- 

- Have there been any family experiences that might have influenced your child (ie, moves, deaths, births, divorce, etc.)? If yes, please explain.
- 

- What adults live at home with your child?
- 

- How does your child react to change in his/her routine?
- 

- Does your child watch TV/ use a Tablet? \_\_\_\_\_ Yes \_\_\_\_\_ No
  - How well does your child eat? \_\_\_\_\_ Little \_\_\_\_\_ Some \_\_\_\_\_ Slowly \_\_\_\_\_ Feeds Him/Herself
  - What does your child like to eat?
- 

- What does your child NOT like to eat?
- 

- Does your child have any food restrictions?
- 

- Does your child indicate bathroom needs? (ie. words for needing to go potty, etc)
- 

- What are your child's regular bladder and bowel patterns?
- 

- What are your child's sleep patterns? (ie, what time do they wake up, take a nap, and go to bed).
- 

## Social Relationships and Play

- Does your child play well alone?
- 

- What activities does he/she prefer to do while playing alone?
- 

- Does your child prefer to play indoors/outdoors?
-

# Getting Acquainted

This information is confidential and is intended for your child's teacher to better understand your child.

- What age(s) are your child's most frequent playmates?

---

- Does your child need extra time/preparation to change from one activity to another?

---

- Is your child frightened by any of the following items:

Animals  Rough Children  Loud Noises  New Experiences  The Dark  
 Storms  Other(s)- Please List Below:

---

- What type of temperament does your child usually have:

Quiet  Happy  Teary  Bossy  Playful  Aggressive  Talkative  Observant  
 Curious  Shy  Cautious  Friendly  Outgoing  Other(s)-Please List Below:

---

- Does your child have any problems with mood or behavior? If yes, please describe.

---

---

- What form of discipline do you use at home?

---

- How does your child react to discipline?

---

- What causes your child to show a temper?

---

- How do you respond?

---

- How do you comfort your child?

---

- Does your child use special comforting items (ie, blanket, stuffed animal, doll, etc.)?

---

Please use the space below to let us know the wonderful things about your child that they may be too shy to share. Any words of advice that will help us to know them better is encouraged.

---

---

---

---