

Family Questionnaire

Child's Name _____ Nickname _____

1. How did you hear about our program? _____

2. What past experiences does your child have with other groups of children?

3. Please list the members of your household and their relationship to your child.

4. Are there any other family members or friends who play a significant role in your child's life?

5. What kind of pets do you have and what are their names? _____

6. Which languages are spoken in your home? _____

7. Parent/Guardian occupations: _____

8. What information about your family's background and culture would you like to share with us?

9. Describe your child. Include information about your child's temperament and personality:

10. What are your child's strengths?

11. What concerns do you have about your child?

12. Have there been any recent stressful events in your child's life (divorce, moving, death in the family, or other)?
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13. What are your child's favorite activities and interests?
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14. What words does your child use to go to the bathroom? _____
15. When your child is upset, what helps him/her calm down?
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16. Please list child's favorite foods and any eating concerns:
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17. What are the holidays, special days or traditions in which your family participates?
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18. What are your child's fears and dislikes? _____
19. What kind of discipline works best for you?
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20. What are your values and expectations about school?
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21. How does your child feel about coming to school? _____
22. What goals do you have for your child this year?
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23. Please make comments about anything else you think I need to know about your child or family (medical conditions, behavioral, developmental history, adoptions, etc.):
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