



**Child Information Form**

Please fill out the following student information request form. Since parents know their children best, the information you share will assist in setting appropriate individual educational goals for the kindergarten years. You may bring it back, scan and email or take a picture and email.

<b>Child's Name:</b>			
1) Describe your child's character in a few words.			
2) What upsets your child? How does he/she react?			
3) What are your child's strengths?			
4) What are your child's out of school activities, hobbies, interests?			
5) Please list sibling names and ages.			
6) Please list special pets.			
7) Are there any personal or physical problems I should be aware of? Example; custody agreements, allergies, religious preferences, health concerns. (Please feel free to request a private conference to discuss these).			
8) Can your child print his/her name?			
	Yes	No	Almost
9) Does your child independently dress self (coat-boots)?			
	Yes	No	
<i>(Please turn over)</i>			

10) Does your child enjoy some sit down academic activities such as puzzles, painting, coloring, or is he/she still primarily interested in play?

11) Do you read regularly to your child (3 times weekly or more)?

Yes                  No

12) Can your child use scissors?

No                  Beginning                  Well

13) Can your child recognize numbers?

1 - 5                  5 - 10                  10 - 20                  20 +

14) Can your child recognize alphabet letters when shown individually out of order?

Some                  All                  None

15) Does your child recognize basic colors?

Red    Blue    Yellow    Orange    Purple    Green    Black    Brown    Pink    White

16) How would you like to see your child grow this Kindergarten year?

  
  
  
  
  
  
  
  
  
  

17) Does your child have access to a computer/ internet and approx. how much time would they spend a week?

In your opinion, what areas require most growth, learning or improvement?

Thank you for taking the time to fill out the information on this form. Your replies will help me get to know your child more quickly and will enable me to set individual learning goals.

*Denise Henry*