



## COASTAL KIDS PRESCHOOL INFORMATION SHEET

Please answer the following questions as fully as possible to give us an accurate picture of your child as she or he enters our preschool environment. You are not required to share any information you don't feel comfortable sharing, but please understand that the more we know, the better we can meet your child's needs. This information is confidential and will only be shared with your child's teachers and our education director. *We look forward to caring for your child and getting to know your family!*

Name of Child: \_\_\_\_\_ (prefers to be called) \_\_\_\_\_  
DOB: \_\_\_\_\_

### SOCIAL/EMOTIONAL ACTIVITY

Does your child have any previous school or day care experience? Yes  No

What was the length of their attendance? \_\_\_\_\_

Were there any adjustment/separation issues? Yes  No

If so please explain: \_\_\_\_\_

Please explain your child's emotional reaction to change. What is your child's reaction to new people?

\_\_\_\_\_

What are your child's favorite activities and interests? \_\_\_\_\_

\_\_\_\_\_

Does your child generally prefer to play alone or with children? Describe how your child does with a group of children: \_\_\_\_\_

\_\_\_\_\_

Describe your child's temperament (explorer, contemplative, big talker, shy) \_\_\_\_\_

\_\_\_\_\_

Does your child exhibit specific fears (to strangers, animals, etc.)? Yes  No

Please specify: \_\_\_\_\_

Please describe how you usually soothe your child if s/he is upset, hurt or just needs some special comforting. \_\_\_\_\_

\_\_\_\_\_

Describe your child's speech: \_\_\_\_\_  
\_\_\_\_\_

### TOILETING

Is your child toilet trained? Yes  No

Please describe your child's toileting skills and patterns of frequency. Does she or he need reminders, help with clothing, etc? If in the middle of training, please describe some things you are trying at home that seem to be working well. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### FAMILY STRUCTURE

Siblings of child: \_\_\_\_\_

Are parents: Married  Single  Divorced  Widowed  Foster Parent  Other

If divorced, please explain custody arrangements: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there other things it would be helpful for us to know about your child's family structure? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### FAMILY CULTURE

Are there any languages other than English spoken in your home? Yes  No

Please specify: \_\_\_\_\_ What does your child speak or understand? \_\_\_\_\_

What is your family's ethnic/cultural background? Are there any family traditions, customs, stories, foods, songs, etc that you would enjoy sharing with our class? \_\_\_\_\_  
\_\_\_\_\_

What beliefs/values do you feel are most important to you when raising your child (i.e. nutrition, diet, super heroes, religious beliefs, compassion, etc)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there things Coastal Kids could do that would help you and your family feel supported by our staff and program? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### GOALS AND COMMENTS

Please describe your goals for your child while they are in preschool. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please use the following space to comment on other information you would like to share. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Thank you for your helping us to better understand your child!*