

KINDERGARTEN HOME INFORMATION

(This information will help us get acquainted with your child.)

1. Child's name _____
2. Is the child cared for at home by anyone other than parents? _____
3. What time does the child usually go to bed? _____
What time does the child usually get up? _____
Does the child usually take a nap? _____
4. Has the child attended preschool? _____
If so, when and for how long? _____
What other supervised group activity has he/she had? _____
5. Does he/she play with other children? If so, how old are they? _____
6. Would he/she rather play alone? _____
7. Would he/she in general, rather be with adults? _____
8. Has he/she spent most of his/her life in California? _____
9. What are his/her particular interests? _____
10. Does he/she have pets? If so, what are their names? _____
11. Is English spoken as the primary language spoken in the home? _____
12. Can the child dress his/her self _____, tie shoes _____, button clothes? _____
13. Does the child have frequent colds or allergies? _____
14. Does the child have trouble with eyes or ears? Specify _____
15. Any speech / language difficulties? If so, have evaluations been done and/or therapy started?

16. Are there adults other than parents living continuously at home? _____
17. Please list all siblings (whether living in the same household or not) _____

18. Has your child had any unusual experience which has either helped or hindered his/her development, i. e. travel, long illness, living with other people, etc.? _____

19. Is your child on any medications that would affect his/her behavior? _____

20. Parent's comments _____