



Forest Hills Preschool Family Information Form

(for your child's teacher)

Child Name:
Who is in your child's immediate family?
Who lives at home with your child?
What is the primary language spoken in your child's home?
Are there any special arrangements, such as shared parenting?
Are there any changes or transitions that your child has recently experienced or is experiencing:
Are there any cultural or religious practices of your family of which we should be aware?
Do you have any pets at home? If so, what are they and what are their names?
Has your child had a previous care arrangement? If so, additional details?
Does your child have any favorite foods?
Does your child dislike any foods?
Are there any foods your should not be fed? (Allergies, cultural beliefs)
Please circle ALL of the words that best describe your child's personality and behavior: active adventurous affectionate anxious bossy bright busy calm cautious

cheerful content creative curious easily-angered energetic friendly happy
gives-in-easily hesitant insecure jealous likes structure/routine loud loving
mellow outgoing prefers adult attention quiet sensitive serious shares well
social spontaneous stubborn tentative other:

Are there any additional personality and behavior characteristics that would be useful to know about your child?

Are there things that frighten your child? If so how does he/she react and what do you do to comfort him/her?

What routines/actions or items do you use to comfort your child?

What causes your child to feel angry or frustrated?

What methods do you use to respond to your child's negative behavior?

Is your child toilet trained? If not, have you started the toilet training process?

Does your child need assistance when using the toilet? If so, how?

What words, gestures or signs does your child use if he/she needs to use the bathroom?

What are your child's sleeping routine and naps?

What might you and/or your child be anxious about as he/she starts in the program?

What are you and/or your child excited about as he/she starts in the program?

What are your expectations of this program?

What other information would be helpful for the staff caring for your child to know?

Contact Information:

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Email Address: _____