

Family Get Acquainted Form

Please Check Your Class:

- Under Ones
- Jr. Parent -Toddler
- Transitional Parent-Toddler
- Junior Preschool (am)
- Mixed Age Preschool (pm)
- Senior Preschool (am)
- Fives Class

General Information	Today's Date:		
	Child's Full Name	Child's Date of Birth	Age (Years/Month) in September
	Parent (s') Names , Ages, Occupations		
	Siblings (s') Names & Ages:	Languages spoken at home:	
	Do you have any pets? (please describe)	Important people in child's life (grandparents, relatives, etc.). Do they live locally?	

For the Following questions, please use additional paper if necessary.

Developmental History	<p>If known, what were pregnancy and delivery like? What were the preparations like for the child entering your family and describe first few weeks with your child?</p>
	<p>Describe your child's early development (feeding, sleeping, social, etc.). ** For returning students, please comment on how your child has grown in the last year.</p>
	<p>Describe your child's medical history and any current health concerns.</p>
	<p>Please list your child's allergies, if any:</p>

Developmental History Cont...

Describe any significant medical or mental health history and current health concerns for other family members.

What major family events has your child experienced (birth of a sibling, moving, divorce, major illness, loss of loved one, death of pet, etc.)?

Your Child

How would you describe your child's personality?

What does your child enjoy?

What does your family enjoy doing together during free time?

In what ways does your child communicate his/her ideas, needs and feelings?

How does your child interact with other children and adults?

School

Does your child have any prior school or child care experiences? If so, describe

What are your goals for yourself, your child and your family at Allen Creek this year?

Do you have any concerns about your child's development?