

How does your child react to controls and correction? _____

In separating from you, how does your child react? _____

Has your child any fears of which others should be aware? _____

PLAY INFORMATION:

What activities does your child enjoy? Include favorite toys, stories and imaginary playmates. _____

Does your child usually play alone, or with other children? _____

What age and sex are your child's most frequent companions? _____

How does your child interact with other children? _____

PREVIOUS SCHOOL EXPERIENCES:

Has your child attended St. Luke Mommy & Me sessions: Year ____ / ____ Fall ____ Spring

Has your child attended a preschool or other childcare program? _____

How did you hear about our preschool? Please be specific. _____

This will be my child's 1st 2nd 3rd 4th (circle 1) year at St. Luke Preschool.

List **all** previous teachers at St. Luke: _____

OTHER INFORMATION:

Is your child receiving services (ex: speech)? _____

What would you like your child to gain from their preschool experience? _____

ADDITIONAL INFORMATION such as adoptions, separations, divorce*, illness, death which might be helpful to us in caring for your child. _____

*In cases of divorce or separation please explain custody and visiting arrangements. _____

If both parents work outside the home, who cares for your child & is responsible for bringing your child to school? _____

Who other than parents can we release your child to?(names) _____

Do we have your permission to photograph your child? ____ Yes ____ No _____

Parent Signature