



## Getting To Know Your Child & You

**By providing us with more information about your child, we can get to know him/her better, even before their first day of school!** This information will be shared with your child's teacher. Please complete and submit one form per EC child to the EC Office before the first day of school.

Child's Name: \_\_\_\_\_

### **Family Makeup**

1. Parents' Names \_\_\_\_\_

2. Does the child have siblings? \_\_\_\_ Yes \_\_\_\_ No

3. If yes, what are their names and ages?

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4. Is there anyone else living with child? \_\_\_\_ sitter \_\_\_\_ housekeeper \_\_\_\_ grandparents

### **Child Care Arrangements**

1. Will your child be using our aftercare program regularly? \_\_\_\_ Yes \_\_\_\_ No

2. Is there anyone else who has your permission to pick up your child from school?  
\_\_\_\_ Yes \_\_\_\_ No

If yes, who? \_\_\_\_\_

### **Background**

1. Important events: have there been any important events in your child's life (e.g., new baby, moving, accidents, illnesses, deaths) of which teachers should be aware of?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Professional working with your child: Are there professionals working with your child outside of school? \_\_\_\_ Yes \_\_\_\_ No

If yes please explain.

\_\_\_\_\_  
\_\_\_\_\_

3. Health: Does your child have any special physical or emotional health problems (e.g., asthma, allergies, Aspergers, attention deficit disorder, eczema, sleep difficulties) that may help us understand him or her better?

\_\_\_\_\_  
\_\_\_\_\_

4. Adoption: Is your child adopted? \_\_\_\_\_ Yes \_\_\_\_\_ No If so, at what age? \_\_\_\_\_  
Does your child know? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, how have you explained the adoption to the child?

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**Other Information You May Want Teachers to Know**

1. Does your child have any special interests and abilities (music, drama, sports)?

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2. Does your child have any concerns that you would like teachers to know about?

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3. In what ways would you like to see your child develop this year?

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4. What other information would you like to convey to your child's teachers?

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**For Families Where Separation or Divorce Has Occurred**

Please answer the following questions:

1. Are parents  Separated  Divorce Pending  Divorced

2. Who is the child's legal guardian? \_\_\_\_\_

3. To whom should classroom information be sent to? \_\_\_\_\_ Father \_\_\_\_\_ Mother  
\_\_\_\_\_ Both

4. When is the child scheduled to be with each parent? \_\_\_\_\_

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5. What was your child told about the event? \_\_\_\_\_

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6. Will he/she know that the teachers will know? \_\_\_\_\_

7. Please share any other information you think the school should be made aware of:

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