

ALL ABOUT MY CHILD

Student Data

First Name: _____

Middle Name: _____

Last Name: _____

Preferred Name: _____

Date of Birth: _____ Place of Birth: _____

Gender: _____ Male _____ Female

Citizenship Status: _____ U.S. Citizen
_____ Non-U.S. Citizen; Years in the U.S. _____

Native Language: _____

What language did your child speak when he/she first learned to talk? _____

What language does your child use most frequently at home? _____

What language do you use most frequently with your child? _____

What language do the adults at home most often speak? _____

Does this student receive any of the following services:

Speech and Language: _____ Yes _____ No

Special Education: _____ Yes _____ No

504 Plan: _____ Yes _____ No

Sibling's Name	Age	<i>living in the home?</i>	
_____	_____	yes	no
_____	_____	yes	no
_____	_____	yes	no
_____	_____	yes	no

Names of others living in the home and relationship to the child:

Residency/Address Information

Student's Street Address: _____

City/State/Zip: _____

Home Phone: (no cell phones – put NA if none) _____

Resides With: _____ Both Parents _____ Shared Parenting _____ Guardian (Foster/Court)
_____ Mother Only _____ Mother & Step-Father _____ Grandparent
_____ Father Only _____ Father & Step-Mother _____ Other: _____

Residential Parent/Guardian #1:

First Name: _____ Last Name: _____

Relation: ___ Mother ___ Father ___ Step-Mother ___ Step-Father ___ Guardian ___ Grandparent ___ Other

Home Phone: (no cell phones – put NA if none) _____

Cell Phone: _____ Work Phone: _____

Personal Email: _____ Work Email: _____

Employer: _____ Occupation: _____

Step-Parent Name: _____

Cell Phone: _____ Work Phone: _____

Personal Email: _____ Work Email: _____

Employer: _____ Occupation: _____

Parent/Guardian #2:

First Name: _____ Last Name: _____

Relation: ___ Mother ___ Father ___ Step-Mother ___ Step-Father ___ Guardian ___ Grandparent ___ Other

Home Phone: (no cell phones – put NA if none) _____

Cell Phone: _____ Work Phone: _____

Personal Email: _____ Work Email: _____

Employer: _____ Occupation: _____

Step-Parent Name: _____

Cell Phone: _____ Work Phone: _____

Personal Email: _____ Work Email: _____

Employer: _____ Occupation: _____

Help Us Get to Know Your Child

Favorite color _____

Favorite food _____

Security items _____

Favorite game _____

Most important family holidays and celebrations _____

My child enjoys (choose as many as apply)

___ coloring ___ painting ___ movies ___ other

___ being inside ___ being outside ___ singing *describe:*

___ building ___ drawing ___ dolls _____

___ vehicles ___ balls ___ reading _____

Describe previous formal preschool or play-group experience: _____

Describe any responsibilities that your child has at home: _____

Describe the form of discipline that is most effective with your child: _____

Describe your child's experience with church or faith activities: _____

Is your family affiliated with a church or other faith-based organization? ___ Yes ___ No

If yes, the name of the church or organization is _____

Describe your expectations for your child this year at preschool: _____

Please check all that apply:

I would be interested in belonging to a *Mountview Parent* group and attending quarterly meetings.

I would be interested in belonging to a group of parents who could meet regularly to pray for the concerns of the preschool, its students, staff, and their families.

I know of an organization or a person who would be willing to share pertinent knowledge or skills with the preschoolers. (Please describe and provide contact information.) _____

I would be willing to present a 10-minute time of sharing about my job or hobby at some time during the school year with my child's preschool class. (Please name job or hobby) _____

I would like to help the teacher with occasional classroom needs throughout the school year.

I would be willing to drive and transport children during occasional field trips (M-F; 8:30 - 11:30 a.m.)

As the parent/legal guardian of the student listed on this form, my signature below signifies that the information provided is accurate and current to the best of my knowledge.

PARENT/GUARDIAN SIGNATURE: _____

PARENT/GUARDIAN (PRINTED): _____

DATE: _____