

ACPC Child Information Form

CHILD'S NAME:

Other children in the family/persons living in the household:

PHYSICAL DEVELOPMENT

Is there anything specific that would be helpful for us to know about your child's general health?

SOCIAL EMOTIONAL

How does your child get along with others?

What prior group experiences has your child had?

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

What is your child's reaction to separation from their parents?

Are there any special family situations that affect your child?

SPEECH & LANGUAGE

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

What language(s) is/are spoken in your home?

Does your child use any kind of specific terminology, or words in a language other than English that would be helpful for the teachers to know regarding daily routines? (bathroom needs, mealtimes, family members, special items)

ROUTINES

In general, is your child's appetite excellent, good, fair or poor?

List favorite foods:

Foods especially disliked:

Does your child have any unique dietary needs or food allergies?

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Describe your child's current sleep habits (attitude, naps, routines)

Describe your child's current toilet habits (diapers, reliably potty trained, etc.)

HOLIDAYS AND CELEBRATIONS

What holidays and traditions are important to your family and in what way do you celebrate?

What are some of your family's favorite places to visit together?

RELEASE

ACPC takes the children out of the center on park trips, walking trips, library visits and other sites of interest. I give my permission for my child to go along on the in-town trips whether walking, on Cy-Ride or in the ACPC vans.

Yes _____ No _____

I give my permission for ACPC staff to apply sunscreen and insect repellent to my child as needed.

Yes _____ No _____

Occasionally children are photographed or videotaped at ACPC for use in the news media, ACPC social media, or for publicity. I give my permission for my child to be photographed and videotaped. Yes _____ No _____

Signature _____

Date _____