

Additional Enrollment Information

Child's Name	Nickname	Birthdate
Name of Parent(s) or Guardian(s)		Date filled out
Home Life		
What languages are spoken in your home?		
Who lives in your home? (Siblings, pets, extended family, etc.)		
What holidays does your family celebrate?		
Typical Daily Schedule		
7:00		
8:00		
9:00		
10:00		
11:00		
12:00		
1:00		
2:00		
3:00		
4:00		
5:00		
6:00		
7:00		
Eating		
Describe your child's eating habits (foods, times, amounts):		

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Sleep

Describe your child's sleeping habits (naps, bedtime, amount of sleep):

Potty Training

Describe your child's diapering and/or potty-training progress:

Child's Interests & Development

Words that best describe your child:

What are your child's favorite games, toys, and activities?

How does your child communicate? (gestures, words, how they express their emotions)

Do you have any concerns about your child's development? (social, emotional, physical)

Has your child previously attended school/childcare or been involved in other group experiences?

What is your child's comfort level in separating from parents or guardians?

What are your goals and expectations for your child at The Playschool?

Is there anything else about your child, family, or your home that we should know about?