## Dear Parents,

Please help your child's teacher get to know him/her by filling out this form. All the information will be confidential and will be used only by your child's teacher in planning for his development. Please return it to school as soon as possible.

Thank you!

first middle last  Address  Nickname used by the family	Child's name			
Date of birth Place of birth one parent other adults  Does your child live with: both parents one parent other adults  (please specify)  Names and ages of brothers  Names and ages of sisters  Pets (Name and type of animal) If not, with whom does the child share a room? If not, with whom does the child share a room? uses self control independent or dependent disagreeable attentive does not follow direction confident or does not follow direction shy	first		middle	last
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(please specify)  Names and ages of brothers  Names and ages of sisters  Pets (Name and type of animal)  Does your child have a room of his/her own? If not, with whom does the child share a room?  Which of these words best describes your child?  lack self control or uses self control  independent or dependent  pleasant or disagreeable  attentive or inattentive  follow directions or does not follow direction  confident or shy	Date of birthP	lace of birth _		
Names and ages of brothers	Does your child live with: _	both parer	nts one parent	other adults
Names and ages of sisters	(please specify)			
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attentive orinattentivefollow directions ordoes not follow directionconfident orshy	independent	or	deper	ndent
follow directions or does not follow direction confident or shy	pleasant	or	disag	reeable
confident orshy	attentive	or	inatt	entive
	follow directions	or	does	not follow directions
In what ways is your child different from other children?	confident	or	shy	
	In what ways is your child d	ifferent from o	ther children?	
	What are your child's favori	te play activiti	es and interests?	

	Now many hours a day does your child watch T.V.?			
	Does your child usually play alone? with one friend?			
	with many children? with a few children? with other children?			
	with younger children?with children of the same age?			
	Is your child's play limited to the yard? to the block?			
	Into how many homes does your child go frequently?			
	Is your child enrolled in any special group?			
	Has your child traveled out of town? Where?			
7	What are your child's responsibilities at home?			
	What does your child enjoy doing with the family?			
]	How does your child get along with other children?			
j	How does your child get along with other adults?			
	What is your biggest discipline problem?			
	How do you discipline your child?			
	How do you think your child will adjust to school?			
	What fears does your child have? animals dark storms other			
	Does your child have any nervous habits?			
	Is your child right or left handed?			
	How does your child feel about going to school?			