



St. Justin Martyr Catholic *Preschool*

Child Information

Child's name _____ Birth date _____

Knowing about your child and your family makes his / her transition to school and their classroom much easier, so please take the time to fill this form out. The information shared here is given to your child's teacher and will assist them in lesson planning and preparing classroom activities.

Brother's/Sister's names and ages (if any) _____

Does your child speak English? _____ if no, language spoken _____

Have any food restrictions? _____ Have any Allergies? _____

Does your child have any special attachments such as a blanket, stuffed animal, pacifier, thumb?

How would you describe your child's personality? (Shy, talkative, quiet, active etc.)

Please list members of your household, including extended family such as a grandparent, aunt, uncle. And please use this space to list special circumstances in your child's life. Such as child's parents are divorced, child's parent/parents deceased etc.

Does your child have any pets? _____ If yes, please list type of pet and name _____

Has your child attended school before? _____ If yes, where did your child attend school? _____

Check all areas that apply to your child:

My child is potty trained ____ partly trained ____ fully trained ____ In diapers ____ Pull ups ____

My child feeds himself / herself? ____ dresses himself/herself? ____ take naps? ____

Picks out his/her clothes? ____ Goes to bed easily? ____ Has their own bedroom? ____

Washes his/her own hands? ____ Helps clean his/her room? ____

All of the information you provide on this form will be helpful to your child's teacher and will be used to assist us in knowing them better. If there are any custody issues regarding your child please let the front office know.

Parent Signature _____ Date _____

Please use this space to write any information you feel will help us know your child better.

Office use only

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| Registered _____ | Admission date: _____ | Days of attendance _____ |
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