

# Family Survey

Please assist us in getting to know your child and your family by completing this form. We look forward to partnering with you to make a positive learning experience for us all.

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Child's full name \_\_\_\_\_ Date of birth \_\_\_\_\_

Name to be used at school \_\_\_\_\_ Child's birthplace \_\_\_\_\_

Mother's name \_\_\_\_\_ Father's name \_\_\_\_\_

Mother's birthplace \_\_\_\_\_ Father's birthplace \_\_\_\_\_

Mother's ethnicity \_\_\_\_\_ Father's ethnicity \_\_\_\_\_

Child's primary language \_\_\_\_\_ Language spoken at home \_\_\_\_\_

Siblings: Name \_\_\_\_\_ age \_\_\_\_\_

Name \_\_\_\_\_ age \_\_\_\_\_

Name \_\_\_\_\_ age \_\_\_\_\_

Name \_\_\_\_\_ age \_\_\_\_\_

Family pets: Type (dog, cat, etc.) \_\_\_\_\_ Name \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Child's primary address: \_\_\_\_\_

List those who live with the child at this address:

Name \_\_\_\_\_ relationship to child \_\_\_\_\_

Name \_\_\_\_\_ relationship to child \_\_\_\_\_

Name \_\_\_\_\_ relationship to child \_\_\_\_\_

Name \_\_\_\_\_ relationship to child \_\_\_\_\_

Alternate address for child: \_\_\_\_\_

List those who live with the child at this address:

Name \_\_\_\_\_ relationship to child \_\_\_\_\_

Name \_\_\_\_\_ relationship to child \_\_\_\_\_

Name \_\_\_\_\_ relationship to child \_\_\_\_\_

Name \_\_\_\_\_ relationship to child \_\_\_\_\_

List any dietary needs/concerns for your child that you would like us to know about:

List any health needs/concerns for your child that you would like us to know about:

May we photograph / videotape your child in class for educative purposes? YES NO

In what types of activities does your child participate outside of school (sports, clubs, etc.)?

FOR ANYONE IN THE CHILD'S HOUSEHOLD: List talents or interests you have that you would be willing to share with our children (baking, cooking, art, music, sewing, computers, crafts, woodworking, etc):

Please use the space below or an additional sheet to write down any other thoughts you would like to share with us concerning your child. For instance, you may want to tell us about your goals and expectations for your child this year, if your child has experienced any significant changes (such as a change of residence, birth of a sibling), if you have any concerns about your child's adjustment to preschool, if you have any concerns about your child's overall development thus far, or any special interests your child has.