



# GLORIA DEI PRESCHOOL CHILD INTEREST SURVEY



## TELL US ABOUT YOUR CHILD

**PLEASE RETURN THIS TO SCHOOL ALONG WITH YOUR FIRST TUITION PAYMENT ON JULY 1ST**

TO HELP US GET TO KNOW YOUR CHILD AND TO PLAN ACCORDINGLY, PLEASE ANSWER AS MANY QUESTIONS AS YOU CAN. THE MILESTONE CHECK LIST ON THE BACK OF THIS FORM WILL ALSO HELP US TO ACCESS YOUR CHILD AND PLAN FOR HIS/HER NEEDS. PLEASE PRINT NEATLY.

Child's Full Name \_\_\_\_\_ Class \_\_\_\_\_ Room # \_\_\_\_\_

Special Interests \_\_\_\_\_

Favorite Book \_\_\_\_\_ Favorite Food \_\_\_\_\_

Particular Fears \_\_\_\_\_

What time does your child: wake up \_\_\_\_\_ go to bed \_\_\_\_\_?

Does your child still nap? \_\_\_\_\_ Have a pet? \_\_\_\_\_

Has your child ever been in a group experience away from you? \_\_\_\_\_

How did he/she handle it? \_\_\_\_\_

Is your child participating in any other group experiences? \_\_\_\_\_

Is your child in the care of any other adult during the day? \_\_\_\_\_

Name: \_\_\_\_\_ Relationship \_\_\_\_\_

What language is spoken at home? \_\_\_\_\_

What are some cultural or religious practices that are observed at home?  
\_\_\_\_\_

Does your child live with any extended family members? \_\_\_\_\_

Is there any parent/guardian not residing with you that should receive school information such as Newsletters, Progress Reports, etc. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Do you have any current concerns about your child? \_\_\_\_\_  
\_\_\_\_\_

Please share your goals, hopes, and any expectations that you have for your child this school year?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is the best way to communicate with you? Phone # \_\_\_\_\_

E-mail address (please print clearly) \_\_\_\_\_