

PRESCHOOL & KINDERGARTEN PROFILE

Child's Information

* Full Name _____ Nickname _____
* Birth Date _____ * Home Phone _____
* Address _____ City _____ Zip _____
* Mother _____ * Father _____
* Parent's Address (If different) _____
Who does child live with? _____

Parent/Family Information

Mother's Employer _____
* Cell Phone _____
Business Phone _____
Father's Employer _____
* Cell Phone _____
Business Phone _____
Siblings (name/ age) _____
Other members of household _____
Email Address _____

Medical Information

* Name of Child's Doctor _____ * Phone _____
* Address _____ * City _____
Name of Child's Dentist _____ Phone _____
Address _____ City _____

Emergency Information – if neither parent can be reached, in case of emergency call:

* Name _____

* Full Address _____ * City _____ * Phone(s) _____
* Name _____
* Full Address _____ * City _____ * Phone(s) _____
Who is authorized to pick up your child from school?
* Name _____ * Phone _____
* Name _____ * Phone _____
* Name _____ * Phone _____
(child will be released only to parents and those who are listed on this profile over the age of 18)

***Information required by the State Licensing Board. Please fill out completely.**

Helpful Information

Does your child have food allergies? _____

Food restrictions? _____

*Is your child allergic? _____ *What is your child allergic to? _____

*How does it usually manifest itself? _____

*Does your child have any other problems we should be aware of or any special care needs?

(ie: seizures, diabetes, asthma) _____

Does your child have speech problems? _____

What method of discipline is used in your home? _____

What is child's usual reaction? _____

How would you describe your child's personality? _____

Does the child have pets? _____

Group play experience? _____

Neighborhood playmates _____

Who has cared for child other than parents? _____

