

INTAKE INFORMATION
SUNFLOWER CHILDCARE/PRESCHOOL

I. Child's Information

Name		Birthdate
Sex		Name of school, if school age

II. Family Information: Parents or Guardians

Name	Home Address and Phone	Place of Employment	Work Phone

Single Married Divorced Separated Foster Parent

Names and ages of other children in the home:

Name	Age	Name	Age

III. Play and Sociability

How does your child get along with other children?

His/her usual playmates are: Girls Boys Older Younger

What is the usual size of your child's neighborhood playgroup?

Previous group experience other than school: Preschool Playgroup Sunday school

Other (Specify):

IV. Personality and Emotional Development

Is your child affectionate? Yes No To whom?

Does she/he accept new people easily? Yes No

What are your child's fears?

Is your child usually happy? Yes No

What, if any, nervous habits does your child have?

V. Discipline			
When you find it necessary to discipline your child, which parent usually does this and how?			
VI. Toddlers			
Sleep habits during the day:			
Does your child have a “fussy” time?	Yes	No	When?
How do you handle this “fussy” time?			
Do you have special ways of helping your baby go to sleep? If yes, how.			
Does your child use a pacifier or suck thumb/fingers?			
Has toilet training been attempted?	Yes	No	What is used at home?
Is baby’s skin highly sensitive?	Yes	No	What is used at home?
How does your child relate to strangers?			
Is your child frightened by anything?			
VII. Other Information: Please list some of your child’s favorite:			
Snacks and drinks			
Games			
Other activities			
Give any other information you believe will be helpful to us in understanding your child (use back if needed):			

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