

St. Andrew's Cottage
CHILD INTRODUCTION FORM

Child's Name _____

DOB _____ Today's Date _____

Please help me get to know your child. What are his/her routine, likes, dislikes, etc.

Eating:

Sleeping:

Toileting:

Daily Activities:

Fears:

Likes:

Dislikes:

Habits:

Favorites:

Tell me a little about where your child is developmentally:

Special People in your child's life (siblings, grandparents, etc):

What other information should I know/be aware of to care for your child as an individual? Events at home often influence your child's behavior. I am better to help your child when you inform me of situations and/or events that might influence his/her overall behavior such as divorce, separation, moving houses, etc.

Knowing about these transitional times allows me to give special attention, understanding, and care. The information you give will remain confidential. Has anything happened recently in your child's life that might have an effect on him/her.

Please write below.
