

Child's name _____

**FIRST CONGREGATIONAL CHURCH
NURSERY SCHOOL**

PERSONAL HISTORY FOR RETURNING STUDENT

When your child first entered our nursery school, you completed an extensive developmental history. This information is extremely helpful to us in the caring for your child. As your child moves into our next program, we ask for an update on that history so that we can stay attuned to your child's growth. We urge you to take the extra time necessary to provide us with this information. Thank you.

Program Youngers / Olders Child's Name _____

Birthdate _____ Favorite Nickname _____

Other children in family (Name, age, relationship)

Other adults in household (name, relationship)

Is your child attending any other preschool or day care program? _____

Name of program _____ Schedule _____

Please list known allergies or dietary restrictions.

What is child's general attitude toward eating?

Does your child have any special toileting needs? At what stage are they in this process?

How many hours a day does child watch television/videos? _____

With whom? _____ Usual/favorite program? _____

What time does your child go to bed at night? _____

Awaken in the morning? _____ Does child take naps? _____

How would you describe your child's personality?

How do you feel your child will adjust to this year's program (separation difficulties, new teachers, new routines, etc.)?

Does your child get along with other children?

Does your child have any habits, needs, schedules or touchy spots you feel we should know about in attempting to personalize this year's experience?

Does your child have any fears?

What situations cause your child to become frustrated or upset?

What type of behavior do you consider the most challenging to deal with?

As a parent, what are you looking forward to this school year?

Do you have any comments, questions, concerns or suggestions?

Parent's Signature _____ Date _____