

Family Info Sheet

(use the back if you need more space)

Child's preferred name: _____

Name of Parent/Caregiver 1: _____

Name of Parent/Caregiver 2: _____

Name of Parent/Caregiver 3: _____

Siblings (with age): _____

Does your child have a second household? Who lives there? Names and relation to your child:

Does anyone else live at home with you?

What does your child like to do with you?

What are your child's favorite things?

What are your child's fears and how does he/she handle them?

What is something awesome about your child?

How old was your child when she/he started talking? _____

What would you like me to know about your child?

Do you have any questions or concerns about your child?

Do you have any pets? Name and kind.

Does your child have any allergies?
