

ALL ABOUT: _____

(Child's Name)

My Nickname is: _____

My Birthday is: ____ / ____ / ____

I have ____ brothers and/or ____ sisters. Their names and ages are: _____

MY FAVORITES

My favorite activity is: _____

My favorite food is: _____

My favorite person is: _____

My favorite toy is: _____

MY LEAST FAVORITES

My least favorite food is: _____

I am afraid of: _____

Things I do well: _____

Things I may need help with: _____

Things Mommy/Daddy are working on with me: _____

I have / have not been in a child care setting before. Please describe this experience:

What type of discipline is used at home? _____

Due to allergies or religious beliefs, are there any foods that cannot be eaten? _____

My mommy/daddy would like to share this additional important information with you about me:

Parent Signature: _____

Date: ____ / ____ / ____

Updates: Initials ____ Date _____ / Initials ____ Date _____ / Initials ____ Date _____