

New Student Questionnaire

Date: _____

STUDENT INFORMATION	
CHILD'S NAME:	
Has your child attended preschool before?	
Has your child attended a daycare program?	
If yes, how long were they in the preschool and/or daycare?	
Does your child have separation anxiety when away from you?	
Please list your child's strengths:	
Please list any areas your child might need help in or areas of concern you have:	
Main language spoken in your home:	
Does your child speak more than one language?	
Does your child speak/understand English?	
Is your child potty trained?	
Does your child play well with others?	
Can your child sit still for at least 5-10 minutes at a time?	
Anything else you feel we should know about your child?	