

FPC PRESCHOOL & KDO INDIVIDUAL CHILD PROFILE

Child's Full Name

Preferred Name at School

Gender

Address

Home Phone

Birth date

Guardian's Name

Home Phone

Work phone /

Cell phone

Guardian's Name

Home Phone

Work Phone /

Cell phone

Guardian's Occupation/ Place of employment

Guardian's Occupation/ Place of employment

Guardian's email

Guardian's email

Day Care Provider

Home Phone

/

Cell Phone

EMERGENCY LOCAL PERSONS AND PHONE NUMBER, to be called when parents are unavailable

1. _____ 2. _____

Please list all people living in your home and their relationship to your child and ages of siblings:

*****SPECIAL MEDICAL NEEDS, ALLERGIES, OR CONCERNS WE SHOULD KNOW ABOUT*****

List and explain any previous group experience your child has had _____

My child is especially good at or really enjoys _____

My child learns best by verbal direction, by demonstration, or by trial & error experiences _____

Special worries, fears, or unsettling experiences my child may be dealing with _____

My child can be comforted by _____

My child is comfortable with a group or prefers working alone _____

My child's favorite activities, toys, foods, etc. _____

My child takes care of all his/her bathroom needs _____

Some words to describe my child (talkative, serious, shy, quiet, etc.) _____
