Covenant Methodist Preschool / PDO 2017 – 2018



"ALL ABOUT MY CHILD"

My teacher wants to know about			CLASS	DAYS
	(NAME: First	& Last)	O Male	O Female
Any nicknames?	Date	e of Birth:		
Address:				
(Street, apt#, etc.)		(City &	State)	(Zip Code)
Phone #s: Home	Cell (Mom)			
E-mail address:				
Parent's/Guardian's Names: Fat	her		Mother	
O Married O Divorced (If divorce	ed: Child resid	les with _)
Place of Employment: Father		N	lother	
Occupation/Work #: Father		N	lother	11
Is English your child's first or only	y language? _			
If not, what language does your o	hild understa	and &/or sp	eak?	
My child likes:				
Some of his/her favorite toys are:	·			
Describe your child's personality:				
My child is afraid of				
Some of our favorite things to do	together are	:		
Mom & child				
Dad & child				
Brothers and/or sisters are:				
Name	_ Age	_ Currently	enrolled i	in Covenant?
Name	_ Age	_ Currently	enrolled i	in Covenant?
Any pets?		_		
Any special wants / needs?				
Any food allergies?				
Is your child a vegetarian?				
What church my family attends $_$				
Previous Preschool or Day Care e	experience:			
Was the previous preschool or da	y care a posi	tive experi	ience for y	your child?
What is your child's nap routine?				
Does he/she have a special item	for nap (1s &	2s)?	<u> </u>	
What form of discipline have you	found to be e	effective w	ith your cl	hild?
USE BACK IF YOU WANT TO	SHARE FURT	HER INFO	RMATION	ABOUT YOUR CHILD

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USE BACK IF YOU WANT TO SHARE FURTHER INFORMATION ABOUT YOU	R CHILD