

Child Profile



We would like to provide our staff with a better understanding of your child. Please take the time to fill out the information below so we may better meet your child's individual needs.

Name of Child _____

Date of Birth _____ Date of Enrollment _____ Today's Date _____

1. What does your child enjoy doing the most?

2. What are your child's favorite toys?

3. Are there any siblings?

4. What type of foods does your child like?

5. Does your child have any allergies and/or health issues?

6. Does your child have any fears?

7. Does your child have any special interests?

8. Language spoken at home

9. How would you describe your child's personality?

Specific Needs/Comments:
