



We would like to get to know your child better.  
Please fill out the following questionnaire. Thank you!

Child's Name \_\_\_\_\_ Nickname \_\_\_\_\_

1. What are some of your child's favorite activities?
2. What are some of your child's favorite stories and songs?
3. What are your child's favorite foods? Are there any special food considerations about which we ought to know?
4. Who are the important people in your child's life outside of his/her immediate family (special friends, caregivers, etc)?
5. What pets do you have?
6. What special dislikes or fears does your child have?
7. Does your child have a special routine when getting ready to go to sleep?
8. Is there anything else that you think would be helpful or important for us to know about your child?

