

**Lisle Park District-Gentle Learning Preschool
Student Information Form**

Child's Name _____ Nickname _____

Address _____

Home phone _____ Cell Phone _____

Birth Date _____

Email Address _____

Parent/Guardian Name _____ Cell Phone _____

Occupation _____ Work Phone _____

Parent/Guardian Name _____ Cell Phone _____

Occupation _____ Work Phone _____

Are parents married? _____

If no, may your former spouse pick up your child from preschool? _____

Name, age, and sex of the other children in family _____

Emergency Contact: If parents or guardian are not immediately available, please contact:

1. Friend or Relative _____ Phone _____

2. Friend or Relative _____ Phone _____

Medical Record

Allergies _____

Disabilities (eyes, ears, feet, etc.) _____

Medications _____

Sleeping

What time does your child usually go to bed at night? _____ Get up in the morning? _____

Does he/she take a daytime nap or rest? _____ If so, how long? _____

Speech

Does he/she speak plainly so that others, besides at home can understand? _____

Has your child received, or currently receiving, speech therapy? _____

What is the primary language spoken in the home? _____

Toilet

When your child has to use the toilet, which term do they use? _____

Personality

Does he/she have any special fears? _____ If so, please list and explain _____

Are you aware of any special concerns, such as aggression, over activity, fixations, etc?

Discipline

By what means do you "discipline" your child? _____

Miscellaneous

Is there any information which we should have concerning your child which would help us to understand them better? _____

What are you hoping to have your child gain from this experience? _____

Has your child ever been separated from you? _____

What previous group experiences has your child had? _____

Is your child left or right handed? _____

Which grade school will your child attend? _____

Do you or your spouse have an interesting occupation, cultural traditions or hobby that you would like to present to our students? _____