



Family Questionnaire



We want to get to know your child as they join Live & Learn or transition from one classroom to another. Please take a moment to fill out the following questions (with input from your child if applicable!). You (or your child) may also want to write us a letter to give us any more information that you think would be helpful for us to know! Thank you!

CHILD:

Name and date of birth:

Name/nickname we should use:

Tell us about your child's routine (eating and sleeping/napping habits, special attachments, etc.) Are there any special ways to help your child settle down at rest time?

What does your child like, dislike, and fear? What would you consider your child's strengths and weaknesses?

Any allergies or dietary restrictions we should know about? How can we accommodate these at Live & Learn?

Anything else about your child you feel it is important for us to know?

FAMILY:

Tell us about your child's family (parents/guardians names and occupations, sibling names and ages, pets, etc.).

Does your family have any special traditions that you want us to know about or might like to share with us at Live & Learn? If so, what are they and when do they occur? Is there a way Live & Learn can support you in this?

Are there any major life events happening in your family that we should know about?

CHILDCARE:

How can we connect your child's life at home with their time at Live & Learn?

What would you like your child to get out of his/her time with us?

Typical pick-up/drop-off (who and when)? How can we help with this transition?

What do you expect from us as teachers?

What concerns do you have about having your child in group care?

How can we best support you and your child during the transition process into a new classroom?

OTHER QUESTIONS/CONCERNS: