



LADYBUG PRESCHOOL

Bettendorf Presbyterian Church
1200 Middle Road
Bettendorf, Iowa 52722

Ladybug Preschool Information Intake Sheet

I. Identification Information:

Child's Name _____ Gender: _____
Last First Middle

Nickname: _____ Birth Date: _____

Child's Address: _____

Home Phone Number: _____

Parent or Guardian Information:

Name: _____ (Mother) _____ (Father)

Address: _____

Cell Phone # _____

email Address: _____

Place of Employment & Phone Number

II. Family History:

Marital Status of Parents: _____ Married _____ Divorced _____ Separated

Other Children at Home: (name & Age) _____

III. Physical Routines:

Does your child have any unusual eating patterns or food dislikes? _____

Does your child have any food allergies? _____ If so, please explain. _____

Is your child allergic to pets or other things? _____ If so, please explain. _____

What is your child's usual bed time? _____ Usual waking time? _____ Does your child nap? _____

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Is there anything in your child's physical condition which might affect his participation in our preschool program?

IV. Play and Sociality

How does your child get along with other children? _____

Does your child attend daycare or a baby sitter's house? _____ How many hours per day? _____

Previous group experience: Play Group _____ Preschool _____ Sunday School _____ Day Care _____

What are your child's favorite toys and types of play? _____

Do you have family pets? _____ (If so name & type) _____

Has your family moved out-of-town or into a new neighborhood recently? _____

What vacation experiences has he/she had? _____

V. Personality and Emotional Development

What are your child's fears? _____

What is your child's usual temperament? _____

Does your child accept new people easily? _____

Has your child recently lost someone close to them through death, separation or divorce? _____

VI. What are usual methods of managing your child's behavior? _____

VII. Give any further information which you believe will be helpful in understanding your child.
