

CHRISTCHURCH Presbyterian Child Development Center

Dear Parent,

Welcome to ChristChurch Presbyterian Child Development Center! Please complete the questionnaire and return it to me at your earliest convenience.

Thanks,
Linda Weise
CCPCDC Director

Child's Name	Child's Age	Date of Birth
Parent's Name		
Has your child ever been in a childcare setting before? <input type="checkbox"/> Yes <input type="checkbox"/> No Please describe:		
When your child is upset, how do you comfort him/her?		
What are some of your child's favorite toys, activities, interests, or books?		
Is your child usually _____ cooperative? _____ shy? _____ aggressive? _____ fearful? Are there any particular behaviors you would like us to watch?		
What languages are most commonly spoken at home?		
Do you have any concerns about your child's <input type="checkbox"/> eating habits <input type="checkbox"/> sleeping habits or <input type="checkbox"/> toileting habits? If yes, please describe:		
Does your child have allergies? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe:		
Foods: _____ Animals: _____ Medicine: _____ Other: _____		
Do you have any concerns about your child's speech or language development? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe:		
Please share any additional information that would help us understand or work more effectively with your child.		

