



Happy Minds Kids Academy

Child's Personality Information

Please fill out both front and back of this sheet.

Child's Name: _____ Birth Date: _____

Nickname: _____

Father's Name: _____ Occupation: _____

Business' Name: _____ Business Phone: _____

Mother's Name: _____ Occupation: _____

Business' Name: _____ Business Phone: _____

Other Children in the Family [and ages]: _____

Parents' Marital Status: Married Separated Divorced Widowed

Other members of household: _____ Relationship: _____

Family hobbies: _____

Family pets: _____

Has your child been cared for by other than parents? _____ By whom? _____

Does your child prefer to play alone or with others? [Explain] _____

Favorite toys: _____

Favorite activities: _____

Circle the activities your child enjoys: swinging painting water play slides

 blocks scissors/cutting jungle gym sand box books arts and crafts

Does your child enjoy being read to? If so, how often is your child read to? _____

Has your child had previous preschool experience? [Explain] : _____

Does your child have any special needs?: _____

Does your child have any fears? [Explain] _____

Does your child have any allergies? [Explain] _____

What is the primary language spoken at home? _____

Does your child have any language difficulties? [Explain] _____

Which hand does your child prefer to use? _____

What is your child's attitude about coming to school? _____

Are there any special circumstances or home situations [divorce, separation, recent death] that we may need to know about? _____

List three things that you would like your child to gain from preschool: _____

How did you hear about Happy Minds Kids Academy? _____

Why did you choose Happy Minds Kids Academy? _____
