

Help Us Get To Know Your Child

The University of Michigan – Flint Early Childhood Development Center Brief Description of a Preschooler's Daily Living

Dear Family Members,

This form is used to help the classroom teachers get to know your child so that the child's transition to school is successful. Please note that each question is requesting facts that you believe will be beneficial in helping the teaching staff successfully interact with your child. A more detailed history of your child's development can be shared later, as the teacher plans ways to encourage your child's positive development at the ECDC.

Name of Child _____ Nickname _____

Birth date _____ Today's Date _____

Family members who the child interacts with frequently and who we should mention during our time with your child ...

1. How does your child feel about going to school? (Circle all that apply)

Crying/clingy **Scared** **Don't Know** **Eager/confident** **Looking Forward**

2. How do you feel about your child going to school?

3. How does your child react to new situations such as going to new places, having a babysitter, a new sibling?

4. What suggestions do you have for us to help your child adjust to school?

Preschool children are mastering lots of self-help skills.

	By Self	With Help
Wipes nose		
Toileting		
Simple dressing; socks, coat		
Pulls up/down pants		
Washes/dries hands		
Brushes teeth		
Serves self food		

5. What are some of your child's favorite things to do at home or school?

6. What are your child's favorite books?
7. What are your child's special interest/skills?
8. Who else takes care of your child other than you?
9. What do you hope your child will learn this year in school?
10. How does your child enjoy playing? Are there certain toys or games your child particularly enjoys? Are there activities your child does not like?

Culture

At the ECDC we strive to provide your child with many diverse experiences in all areas of the curriculum. In order to provide a culturally diverse classroom where all families and staff members feel welcome we are seeking to provide cultural awareness through education. The best way in which we can provide this education is to include the families in which we serve:

1. Do you have any cultural customs or traditions that you would feel comfortable sharing with the children in our program? If so, what types of materials would you feel most comfortable in sharing?
2. In regards to your own children, are there any cultural considerations you would like to address to assist us with their daily care?
3. What countries or geographical areas has your family lived in or experienced? Do you have any information to share with us about these experiences that can help us know your child better?
4. What languages are spoken in your home? What languages does your child understand or speak?
5. What holidays do you observe in your home? What would you be willing to share about these specific holidays in your child's classroom? (decorations, books, music, clothing, art, food)

Eating

1. What is your child's typical eating behavior?

2. How do you know when your child is hungry?
3. What times of the day does your child usually eat?
4. How does your child react to trying new foods?
5. Does your child have any food allergies, special needs, or foods your child does not eat due to medical or religious reasons? (A separate form will also need to be filled out.) If so, please describe here:

Sleeping

1. How does your child let you know he/she is tired?
2. What is his/her typical nap/rest time?
3. What is your usual routine for helping your child go to bed? Does your child sleep with a special blanket, toy or pacifier?
4. What is your child's general mood upon waking up?
5. What is the routine when your child wakes up?

Medical History

1. Are there any existing medical conditions we should know about? If so, please identify and describe how we should care for your child?
2. What else would you like us to know about your child?
3. Do you have any specific short-term learning goals for your child?