ACADEMY OF
SAINT BARTHOLOMEW

Parent/Guardian Questionnaire - Preschool, Kindergarten and Grade 1

Dear Parents/Guardians,

Please complete the following information regarding your child and family.

_____

Child's Name Date of Birth

PRESCHOOL ONLY:

Please select: A) 3 yr old B) 4 yr old

Please select: C) Full Day D) Half Day

Is your child currently enrolled in a preschool/daycare program? Yes No

If yes, what is the name of the preschool/daycare program? _____

How long has he/she been enrolled? _____

How many days per week does he/she attend? _____

Is your child fully independent in the restroom? ____ Yes ____ No ____ In Process

Has your child ever been asked to leave or limit participation in a preschool/daycare/kindergarten program? Yes/No

If yes, what was the reason? _____

_____

Describe your child's feeling toward school/daycare._____

_____

_____

How does your child transition to school/daycare on a daily basis? _____

_____

Please share some information about your family: What activities do you enjoy doing together? Who lives in the household? Is there anything you feel is important for us to know about your child?

_____

_____

_____

Please read the following items and circle a number to indicate the frequency of occurrence within the last two weeks. It is important that you answer every item. If you are uncertain of the frequency, give your best estimate.

	Almost Never	Once in a While	Moderately Often	Most of the Time	Almost Always
Plays well alone	1	2	3	4	5
Accepts when things do not go his/her way	1	2	3	4	5
Expresses self freely	1	2	3	4	5
Acts out of control	1	2	3	4	5
Friendly towards peers	1	2	3	4	5
Difficulty following directions	1	2	3	4	5
Easily soothed when upset	1	2	3	4	5
Congratulates others when good things happen	1	2	3	4	5
Functions well with distractions	1	2	3	4	5
Makes friends easily	1	2	3	4	5
Has poor self-control	1	2	3	4	5
Follows rules/limits	1	2	3	4	5
Can complete a short task independently	1	2	3	4	5
Offers to assist other children	1	2	3	4	5
Plays well without adult support	1	2	3	4	5
Plays well with peers/siblings	1	2	3	4	5
Handles disappointment well	1	2	3	4	5
Follows routines in the home	1	2	3	4	5

The information on this form is true to the best of my knowledge as of date signed.

_____

Parent/Guardian Name Date

_____

Parent/Guardian Signature