



2026-28 W. Belmont Ave

Chicago, IL 60618

(773) 270-4696

CHILD INFORMATION

Family and Social History

Child's Name: _____ Date of Birth: _____

Parent (1): _____

Parent (2): _____

Marital Status of Parents:

Married: _____ Divorced: _____ Separated: _____ Single Parent: _____

Custody/Visiting Arrangements _____

Brothers and Sisters of Child

Name: _____ Birth Date: _____

Name: _____ Birth Date: _____

Name: _____ Birth Date: _____

Other Members of Household

Name: _____ Age: _____

Name: _____ Age: _____

Napping

Does your child take naps? _____ (From: _____ TO _____)

Does your child have a special toy or blanket to sleep with? _____

Social Relationships

Do you feel your child will adjust easily to the Daycare? _____

What makes your child angry or upset? _____

How does your child show his or her feelings? _____

Is your child frightened by such things as: animals, rough children, loud noises, the dark, or storms? If so, please specify: _____

Favorite toys and activities at home: _____

Does your child like to be read to? _____ Listen to music? _____

Eating

Is your child usually hungry at meal times? _____ Between meals? _____

What are some of your child's favorite foods? _____

Least Favorite? _____

Does your child eat with a spoon? _____ Hands? _____

Are there any dietary restrictions we should know about? _____

Toilet Habits

Does your child indicate their toilet wishes? _____

Does your child need help with toileting? _____

Does your child have accidents? _____

How does your child react? _____