

**Hilliard City School District Preschool
Family Information**

| Childs Name (Last) | (First) | Nickname (if any) |
|--|---------|-------------------|
| Parent's Name: | | |
| By providing information about your child, you will be assisting staff in creating a positive experience for him/her while in our environment. List any information about your child's habits, abilities or personality that you feel will be helpful to the staff that educates your child. This information also aides in communicating with your child. | | |
| Who lives at home with your child? (Include siblings and their ages, grandparents, etc.) | | |
| Parents occupation: | | |
| What is the primary language spoken in your child's home? | | |
| Are there any special family arrangements, such as shared parenting, living in two home, or custody specifications, etc? | | |
| What are the holidays your family celebrates? | | |
| Do you have any pets at home? If so, what are they and what are their names? | | |
| Does your child have any favorite foods, movies, music, toys or characters? | | |

*******Both sides need to be completed - please fill out the back page*******

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Tell us about your child's personality:

Any special diet restrictions, allergies, or medical needs we should know about?

Any issues you would like us to know about your child's toileting habits?

How many hours does your child typically sleep per day? Does your child have trouble sleeping?

Are there any concerns regarding your child starting school?

The most important thing to know about our family is:

The most important thing to know about my child is:

My goal (s) for my child in preschool are:

Parent/Guardian's Signature

Date