

Welcome to Pre-K3's

Child's Name/Nickname: _____

Mother's Name/Occupation:

Father's Name/Occupation:

Birthdate: _____

Siblings? (if yes, names and ages)

Child's first school experience? (if not, where did he/she attend a 2's program?)

Things your child does well:

What your child likes and dislikes (fears?):

Things that you are working on with your child:

What physical activities does your child enjoy?

Are there any significant strengths or needs that we should be aware of?

Getting to Know You!

My name is _____.

I am _____ years old.

My birthday is _____.

I have _____ brothers and _____ sisters.

My pets are _____.

My favorite toy is _____.

My favorite book is _____.

My favorite food is _____.

My favorite color is _____.

I'm really good at _____.

Look! I drew a picture of me: