

Pony Preschool & Child Development Center

490 North 4th Street, Bayport, Mn. 55003

Child's Development History

Child's Name _____ Date of Birth _____

Social Relationships and Development

1. Has your child had previous group? _____ Where? _____
2. Does your child have playmates? _____ What Age? _____
3. Does your child know any other children in this center? _____
4. Do you feel your child will adjust easily to childcare? _____
If no why? _____ Advise how we can help. _____
5. Does your child have any fears? _____
6. What makes your child frustrated or upset? _____
7. How does your child express his feelings? _____
8. Characteristic behavior: (please circle the ones that describe your child)
Happy excitable easily angered whinny cries easily cooperative
Fights often active calm cheerful stubborn quiet Independent tantrums
9. Can your child dress her/himself? _____
10. What age did your child begin talking? _____
11. Does your child have speech problems? _____
12. How often is your child read to? _____
13. What is your child's favorite T.V. program _____
14. How many hours per day does your child watch TV? _____
15. What is your child's favorite toy? _____
16. Do you have a pet/pets? _____
17. How well does your child get along with siblings? _____
18. Please list names and ages of siblings:

Name	Age	Name	Age
------	-----	------	-----

Sleeping & Eating Habits

19. What is your child's general attitude towards eating? _____
20. What are your child's favorite foods? _____
21. Does your child feed him/herself? _____
22. Does your child have any food allergies? _____ What? _____
23. What time is your child's bedtime? _____
24. Does your child sleep in his own room? _____ Bed or crib? _____
25. Does your child have a favorite blanket or stuffed animal? _____
26. Does your child nap? _____ Time? _____
27. Does your child have a pacifier at night or nap? _____

Is there any other information that you feel would be helpful for us to get to know your Child? _____
