

THE NEW INTERDISCIPLINARY SCHOOL

TELL US ABOUT YOUR CHILD

Child's Name: _____

Today's Date: _____

- Please tell us the names and ages of the other children at home:

- What types of pets do you have at home? What is your pet's name(s)?

- Does your child have a nickname? Yes/ No _____

- Does your child have any special dietary needs? _____

- Does your child have any food preferences or dislikes? _____

- What are your child's favorite activities? _____

- Does your child have any special fears or dislikes? _____

- How do you comfort your child when he/she is upset? _____

COMPLETE REVERSE SIDE

- What is the primary language spoken in your home? _____
- Are there any other languages spoken in your home _____
- Are there any foods that are specific to your culture that your child is familiar with? _____

- Are there any items of clothing that are specific to your culture that your child is familiar with? _____

- Are there any celebrations or holidays specific to your culture that your family participates in? _____

- Is there any music that your child enjoys that is specific to your culture? _____

- Would you be willing to talk to your child's teacher about helping other students learn about these foods, clothing, celebrations and music? _____

- Is there anything that your child will not be able to participate in due to cultural or religious restrictions? _____

Please provide us with any additional information that you feel we should know about your child.

At **NIS** we recognize how difficult it can be for parents to leave young children in the care of others and for young children to separate from their parents. By filling out this questionnaire, you have assisted **NIS** in creating a more loving, caring, healthy and secure environment for your child. - Thank you