

*All information on this form is strictly confidential;
Translation into home languages other than English provided on request.*



COLLEGE *of*
CHARLESTON

N.E. MILES ECDC

HOME INFORMATION QUESTIONNAIRE

Welcome to ECDC! In order to best provide for the needs and interests of your child and family, we ask you to share information with us. The more we know about your child and family, the better able we are to ease the transition from home to school, or from another program to ours. We seek to work with our families as partners to provide a program, curriculum, and assessment approach that are respectful, appropriate, meaningful, and relevant.

Our philosophy is grounded in the idea that children are 'concrete' learners. In other words, what makes most sense to them is learning about things they have, or can have, direct experience with. Therefore, we also often ask parents to serve as 'resources,' sharing family or professional experiences and knowledge that supports things we are doing in the classroom.

This information is confidential and only used internally by our teaching staff to assist them in making instructionally appropriate curriculum and assessment decisions. We will ask you to update this information annually.

Child's Name _____ Birthdate _____ First Enrollment Date: _____

Signature(s) of parent/legal guardian(s):

Date

2		
3		
4/5K		
4/5K		

SECTION ONE: PARENT AND FAMILY INFORMATION

1.1. Parent/legal guardian Information:

	Parent/guardian #1	Parent/guardian #2
Name		

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Occupation		
Education (circle)	GED HS Bachelor's Master's Doctorate Other	GED HS Bachelor's Master's Doctorate Other
First (native) language		
Would you prefer written materials and communications from ECDC to be provided in a language other than English?		

1.2 Parent professional expertise and/or special interests: Describe any special interests and/or professional expertise you have that you would be willing to share with your child's class (e.g. you are a firefighter or biologist; you play a musical instrument; you can prepare ethnic foods or read stories in a language other than English, etc.)

1.3 List all people living in your home and their relationship to your child:

Name	Age	Sex	Relationship

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1.3 Are there any special factors concerning your family structure that we should know about in order to appropriately address your child's needs and interests? (e.g., divorce/separation, legal arrangements, adoptions, blended family, single-parent, parent health issues, etc.). NOTE: If any particular legal or visitation arrangements are in effect, a copy must be provided to us.

1.4 Family cultural/ethnic/religious background and traditions. What would you like us to know about your family's cultural/ethnic/religious background that will help us provide materials and activities respectful of all our families' home cultures and family traditions?

SECTION TWO: CHILD INFORMATION

2.1 Please describe any health needs that we should be aware of. (Please provide and/or attach additional documentation if needed).

2.2 Are there any comments, questions, or concerns you may have at this time about your child's physical, social/emotional or cognitive development (Please provide and/or attach additional documentation if needed).

2.3. Are there any particular accommodations that you would request or like to discuss with us that you feel might be necessary to meet your child's needs at this time?

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2.4 Describe the approach to behavior management that is used in your home

2.5 Child interests:

Favorite play activities/toys	
Favorite media/music activities/programs	
Favorite books/stories	
Favorite foods	
Particular dislikes?	

2.6 Child play experiences:

Where does your child regularly play?	
With whom does your child regularly play? (i.e., alone, with siblings/ neighbors, etc.)	
Describe any other previous structured play experiences (i.e., child care program, play group, Sunday school, etc.)	

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2.7 Child temperament/emotional information:

Describe any fears your child may have (and how you address them).	
How does your child get along with adults?	
How does your child get along with siblings?	
How does your child get along with other children?	

2.8. Routines

Morning routine (wake time, usual breakfast, etc.)	
Nap routine (if child naps) i.e., usual time, duration, rituals, etc.)	
Evening routine (bed time, rituals, etc.)	
How much sleep does your child usually require each night?	
Is your child toilet trained? What toileting 'terms' is your child familiar with?	
Which hand does your child prefer to use?	
Does your child feed him/herself?	