

V. INFORMATION ON CHILD/REN: Enter the name of each child you are enrolling in the spaces labeled A, B, and C. Answer all questions for each child in the space provided under his/her name.

	A	B	C
NAME OF CHILD			
A. What hours and days per week will child be in care?			
B. How will child go to and from home?			
C. Does child take a mid-day nap or rest? If so, when and how long?			
D. What hour does child go to bed at night?			
E. Does child dress and undress him/her/self? Describe help needed.			
F. What words does child use to indicate need to go to the bathroom?			
G. What are the child's favorite play activities at home?			
H. Does child have neighborhood playmates?			
I. What are the child's most liked foods?			
J. What are the child's least liked foods?			
K. Are there any foods that child should not be allowed to eat for medical or religious reasons?			
L. Does child have any handicaps or other known problems that provider should be aware of?			
M. Does child have any special fears?			
N. If School Age, how will child go to and from school?			
O. If School Age, what after-school or summer activities does child have your permission to participate in? (Give type, location, days of week, hours and method of transportation)			
P. Exceptions, special instructions or other considerations. (i.e., Religion, or ethnic holidays; infant feeding instructions; limitation on use of play equipment, etc.)			
How did you learn about the day care center?			