## STONYBROOK EARLY LEARNING CENTER Child Information Sheet

<u>Parents:</u> The following information is requested to help your child's teachers to better understand your child. All information will remain confidential. Thank you.

Child's Name		
Nickname, if you wish one used		
Birthdate	Is child adopted?	If so, does child know?
Are both parents now living with the child?		
Parents' Occupations:	Father	
	Mother	
Are you willing to share your occupation with your child's class?		
Others living in the home:	(siblings, relatives, etc.)	
Name	<u>Age</u>	Relationship to child
Does your child play with other children regularly?		
What group experiences has your child had?		
Child's Allergies:		

Please indicate anything you feel may be helpful to us in understanding your child. Why do you want your child to have a preschool experience? Feel free to use the back for your answers.