

Wee Blessings Intake Information Sheet

1. **Child's Name:** _____ **Gender:** _____
(Last) (First) (Middle)

2. **Family Information:**

Parents' Marital Status: Married _____ Single _____ Divorced _____ Separated _____

Other children in the home: (name and age please)

1) _____ 2) _____ 3) _____
4) _____ 3) _____ 4) _____

3. **Play and Sociability:**

Previous play experience: preschool _____ play group _____ Sunday School _____
daycare _____ story hour at the library _____

What are your child's favorite activities/toys? _____

Does your child enjoy (circle what applies): cutting coloring gluing
building (Legos) drawing

4. **Personal and Emotional Development:**

What are 5 words that you would use to describe your child?

1) _____ 2) _____ 3) _____ 4) _____ 5) _____

Does he/she accept new people easily? _____

Does your child have any fears? If so, what are they? _____

What methods have you found helpful in helping your child understand boundaries/rules?

Is he/she right or left handed? _____

How is your child feeling about going to preschool? _____

If your child has separation anxiety, what methods have worked well in the separation process?

5. **Other Information:**

Do you have any **concerns** about your child's development?

Is your child currently receiving any of the following services? Circle all that apply:

Speech Therapy Occupational Therapy Physical Therapy

Does your child have any **allergies**? *If yes, please fill out the attached colored allergy form.*

Yes No

What is the most important thing you hope your child will gain from attending preschool this year?

6. **Financial Responsibility:**

I agree to be financially responsible for the year's tuition.

Parent/Guardian signature _____ Date _____

7. If your child is 4 years old, which school will he/she attend next year? _____

8. Field Trip Agreement:

I give permission to Wee Blessings staff to take my child on field trips or walks outside the building. I understand that parent volunteers may be asked to go along.

Parent/Guardian signature _____ Date _____

9. Pick-Up Permission:

I hereby give permission for my child to leave the preschool with the following persons named below. It is the responsibility of the parents/guardians to notify the preschool, in writing, of any changes.

Please indicate your normal routine for pick-up below

NAME	PHONE	RELATIONSHIP	DAY OF THE WEEK (Circle)
_____	_____	_____	M/ T/ W/ Th/ F
_____	_____	_____	M/ T/ W/ Th/ F
_____	_____	_____	M/ T/ W/ Th/ F

Other People Who Might Pick-Up:

NAME	PHONE	RELATIONSHIP
_____	_____	_____
_____	_____	_____

If there is a separate or divorce custody problem of which we should be aware, please explain:

Parent/Guardian signature _____ Date _____

10. Blizzard Lodging:

In case of a blizzard, Wee Blessings Preschool will be canceled. If a blizzard occurs during a class session and the weather is so severe that the children cannot be picked up, lodging arrangements should be made with a family in Orange City. Please fill out one of the following:

*(child's name) _____ lives in Orange City so no further arrangements are needed.

*(child's name) _____ lives outside of Orange City and we have made arrangements with the following family for lodging in case of a blizzard:

Name _____

Address _____

Phone _____

Relationship to child _____ (grandparent, relative, friend, etc.)

Parent/Guardian signature _____ Date _____

11. Statement of Agreement:

We, the undersigned, have read the Parent Handbook and agree with the policies and rules governing Wee Blessings Preschool and understand we may request a complete copy of the detailed policies if desired.

Parent/Guardian signature _____ Date _____

Parent/Guardian signature _____ Date _____