

PRESCHOOL B INFORMATION

Name: _____ Date of birth: _____

Allergies and diet specifications (documentation must be on file): _____

Notes about napping: _____

Notes about communication and effective methods for comforting: _____

Describe anything you would like us to know about your family's values, beliefs, experiences, communication, or language that influence your child's care: _____

My child enjoys: _____

Working on at home: _____

Things I consider important in my child's education are: _____

In summer: We encourage parents to apply sunscreen to children in the morning before arrival. Please let us know if you would like us to apply sunscreen at school. You are welcome to bring a bottle of sunscreen labeled with your child's first and last name and a Nonprescription Topical Product Administration Form must be filled out. Please be aware that in case of siblings, each child needs their own authorization form.

In winter: Remember to bring all necessary outdoor clothing including boots, snow pants, and waterproof mittens. Label all articles with child's first and last name.

Parent / Guardian Signature: _____ Date: _____