



Creative Care Childcare

Child's Name: _____ **Meeting Enrollment Dates:** _____

Names of Meeting Attendees: _____

We look forward to developing a partnership with your family in our program. You provided us with a lot of important medical and contact information during enrollment. We'd like to ask you a few more questions that will allow us to get to know your child and you a little better. Please let us know if you have special needs such as handicap access or translation services. Our goal is to do the best job we can do, welcoming your family into our program and creating a comfortable environment for your child. Would you kindly take a few minutes to complete this questionnaire and bring it with you to your "Getting to Know You" meeting with your child's teacher?

1. Does your child have a nickname? Please provide it if you would like us to use it.
2. In what language do you and your child communicate at home?
3. Is there information about your family composition or household members that you would like to share?
4. What are some of your child's favorite things?
5. Are there cultural or religious holidays that your family observes that you would like to share with the program?
6. What are your child's toileting and napping behaviors?
7. Does your child have any special needs?
8. What are your child's favorite foods?
9. Is there anything else you can share with us about your child that will help us ease the transition for your child?

STOP! Our Director will call you in 45 days to finish (90 days for School Age). Thank you for taking your time to complete this! Date of second Meeting _____

1. What are your expectations of our program?
2. Has your child talked to you about his or her experiences in our program so far?
3. Do you have any questions about the program, curriculum, or facility?
4. Are there any ways that we can improve communication with you about your child's experience?
5. Is there any other information that you would like to share?

Parent Signature: _____ Date: _____