

**BETHEL CHURCH - MDO
GETTING ACQUAINTED WITH YOUR CHILD**

Child's Name _____ Nickname _____

Birth date _____ Home Phone (____) _____

City/zip _____

Father's Name _____ Occupation _____

Mother's Name _____ Occupation _____

Church Affiliation _____

Does your child use a pacifier, blanket, etc. during naptime? _____

Does it have a name? _____

Does your child have an opportunity to be with other children his/her own age?
(When?) _____

Child's favorite playthings? _____

Pets? _____

Does your child play well with peers? _____

Follows directions well? _____

Does your child have temper tantrums? _____

How does he/she react to discipline? _____

Tend to be submissive? _____ Aggressive? _____

Any special fears? _____

Names and ages of other children in family:

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

Has there been a recent birth, death, or other change in the family? _____

Allergies? _____ To what? _____

Is he/she on any continuing medication? _____

Any other information you feel might be helpful to the teachers in getting to know your child better?

