

Dansville 3PK Questionnaire

Child's Name: _____

Boy: ____ Girl: ____

Date of Birth: _____

Person completing this form and relationship to child: _____

Which session is your **first choice**: AM (9:00AM - 11:30AM) ____?
PM (12:30PM - 3:00PM) ____

Please complete the following items so that we can learn more about your child.

1. Some families use nicknames, but others do not. What name would you like us to use for your child (ex. Kate instead of Katherine; Andy instead of Andrew)? Please answer this question carefully! We will be writing this name on many things that we need to prepare for the 1st day of school.

2. Did your child attend a Preschool/Daycare program in 2023-24? _____
(If no, skip to #3)

If so, please provide us with the following information:

Preschool name: _____

Dates attended: _____

3. My child has allergies to: _____

4. Does your child have any medical/health concerns? If so, describe: _____

5. Do you think your child will have separation anxiety? _____

6. Please describe any social/behavioral needs that you would like us to take into consideration when we place your child.

7. Have there been any major changes in the household since your child was born (i.e. - separation/divorce, death, move, new sibling).

8. Please note and explain any other important information that you would like us to take into consideration.

