

# 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) \_\_\_\_

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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 1<sup>st</sup> day of school.

\_\_\_\_\_

2. Did your child attend a Preschool/Daycare program in 2024-25? \_\_\_\_\_  
(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.

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

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

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