

All About Me

Kindergarten Interview Form*

*Parents/Guardians have the right to not respond to anything that they believe may invade their privacy.

Student's Name _____
(Last) (First) (Middle) (Nickname or Preferred Name)

Date of Birth _____ Home Phone: _____

Address: _____

Parent/ Guardian: _____ Relationship to Student: _____

Occupation: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____

Check here if it is okay for us to share your email address with other families in our class

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Occupation: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____

Check here if it is okay for us to share your email address with other families in our class

What is your preferred method of communication? _____

Other Children and/ or Adults Living in the Home:

_____ Age _____ Relation to child _____

_____ Age _____ Relation to child _____

_____ Age _____ Relation to child _____

Has your child had any of the following:

Allergic Reactions to food (_____)

Allergic Reactions to Bee Stings

Asthma

Surgery for _____

Birth Problems (_____)

Other medical problem (_____)

Is any language other than English spoken in your home? If so, please list.

Describe your child in 3 words: _____

Name of previous school (PreK, Daycare, Nursey School, etc.) _____

Describe any prior school experience that your child has had: _____

Describe your child's attitude or interests about starting Kindergarten: _____

List anything you'd like us to know about your family (Culture, holidays you celebrate, activites you enjoy doing together, etc.) _____

Does your child prefer playing: (You may check more than one)

_____ Alone _____ With One Friend _____ With Several Friends

If your child right- handed, left- handed, or showing not preference at this time? _____

Can your child: _____ Zip (pants, coats, etc.)? _____ Snap/ Button? _____ Tie Shoes?

List a few of your child's favorite things, interests, and/or hobbies:

How does your child react to stressful situations? _____

Does your child have any fears, anxieties, or dislikes that we should be aware of? _____

What do you hope your child learns in Kindergarten? (please include any academic concerns that you might have about your child) _____

Is there anything else we should know about your child? _____

Do you have any questions for us? _____