



After School Child Care

Pre-Attendance Information Survey

Child's Name _____ Age _____

Nickname (if applicable) _____

Family's Primary Language _____ Child's Primary Language _____

What activities does your child enjoy? _____

How would you describe your child's personality? _____

What do you think are your child's best qualities? _____

How does your child react and adjust to new situations and new people? _____

Please describe your child's strong dislikes or fears (if applicable). _____

What else would you like us to know about your child? _____
