

PRE-SCHOOL PARENT CONFIDENTIAL QUESTIONNAIRE

Child's Name: _____

Mother Tongue: _____

Has your child spent any considerable amount of time away from you? (e.g. play groups, day care, weekends away with grandparents etc.)

What are your child's likes/dislikes?

What are your child's special interests?

What does your child *not* like to do?

What would you consider your child's strengths to be?

What does your child have difficulty with?

Do you have any specific concerns about your child's behaviour?

Does your child have any special dietary requirements?

Is your child toilet-trained? Yes No

Please note that it is a requirement that your child is toilet-trained to be accepted in Pre-School 1.

Important words in the child's mother tongue:

Hello _____

Goodbye _____

Please _____

Thank You _____

Thirsty _____

Hungry _____

Toilet _____

Tired _____

Mum _____

Dad _____

Mummies/Daddies
coming back _____

Other words:

Does your child still take a nap?

Do you have any special national celebrations you and your child would like to share with the class?

Do you have a special hobby or talent you would like to share with us?

Are there any other ways we can help you and your child in Pre-School?

Name of person completing this form: _____

Date: _____