

HARBOR PRESCHOOL
DEVELOPMENT FORM (1/18)

Child's Name _____

DOB _____

Please list any family situations that may be mentioned by the child, or may affect his/her behavior (i.e. custody arrangements, adoption). If separated, are there any restricted visitation situations we should know about?

List siblings, their ages, and what the child calls them. Also list pets and what they are. _____

Are there other people in the household? If so, list names, ages, and relationship.

Is your child toilet trained? _____ Describe assistance needed and words used.

Do you have concerns about any aspects of your child's development?

Are there any special medical, physical, or emotional needs that the school or staff should be aware of?

What are your child's favorite activities?

Feel free to include any other information about your child that you would like for us to know

What would you like for your child to learn this year while at Harbor Preschool?

Is your child receiving professional services such as speech or occupational therapy?

Developmental Information Form completed by

_____ Date _____