



MIDDLETOWN MONTESSORI SCHOOL

28 S. NEW MIDDLETOWN ROAD • MEDIA, PA 19063 • (610) 891-7214

Background Information

CHILD'S NAME _____ DOB _____ Date _____

It would be helpful to the staff if you would take the time to answer the following questions. Each child is unique, and knowing something about his or her activities, interests, habits, and history helps the teachers to better understand and serve the child's needs. All information is confidential.

Has the child had play experience? _____ Where? _____

How often does your child play alone? _____ Always _____ Often _____ Seldom _____ Never _____

Does your child enjoy playing alone? _____

Does your child have neighborhood playmates? _____

Do other children tend to stimulate your child? _____ Make him/her shy? _____

Child relates best to people of what ages? _____

List any fears your child may have. _____

Does your child have any problems of which we should be aware? _____

Describe your child's personality. _____

Outdoor play activities include _____

Indoor play activities include _____

Other interests and activities _____

Does your child initiate his/her own activities? _____

Is he/she read to? _____ How often? _____

Does your child participate in dressing? _____

Does he/she need help going to the bathroom? _____ What word does your child use for:
Urination _____ Bowel Movement _____

Cubville Pandaville (**only**) - Are you working with toilet training? _____

What method of behavior control is used in your home? _____

Does your child have any allergies? _____