



Kindergarten Information Card

Child's FIRST and LAST NAME that you wish me to use:
Ex. Nick or Nicholas / Charles or Charlie, etc.

BIRTHDATE: _____ PARENTS: _____

ADDRESS: _____

EMAIL: _____ HOME PHONE: _____

MOM'S CELL: _____ DAD'S CELL: _____

WITH WHOM DOES YOUR CHILD LIVE? EX: MOM, DAD, 1 SISTER, GRANDMOTHER, 2 BROTHERS, DOG, ETC.

NAMES / GRADES OF SIBLINGS THAT ATTEND HERE: _____

BABY-SITTER'S NAME/PHONE IF APPLICABLE: _____



PLAN FOR AFTER SCHOOL TRANSPORTATION: _____

DID YOUR CHILD ATTEND PRESCHOOL? WHERE / HOW LONG? _____

HEALTH CONCERNS / ALLERGIES: _____

ACADEMIC CONCERNS OR COMMENTS: _____

WHAT ARE YOUR CHILD'S STRENGTHS? _____

WHAT IS THE MOST IMPORTANT THING THAT I SHOULD KNOW ABOUT YOUR CHILD?

WHAT DO YOU HOPE THAT YOUR CHILD WILL LEARN THIS YEAR?



PLEASE FEEL FREE TO USE THE BACK FOR ANY ADDITIONAL INFORMATION.