



Mother of Divine Providence School

405 Allendale Rd.

King of Prussia, PA 19406

EARLY CHILDHOOD PROGRAM INFORMATION SHEET

Child's Name:

Birthday

Address:

Phone:

Parent(s) Names

1. Has your child attended a nursery school school prior to this one? Yes No

If, so, what school?

2. Has your child attended a library story hour? Yes No

3. Is a language other than English spoken at home? Yes No

If, so, please indicate the spoken language?

4. Does your child have playmates his/her own age?

5. Does your child have a hobby or some special interest?

6. Does your child have any physical problems that we should be aware of?

For example, an allergy, hearing, speech or vision problem?

7. Does he/she take any medication on a regular basis?

8. Does your child have any fears we should be aware of?

9. Does your child have an older brother or sister at this school? Yes No

If yes, please list the names and the grades they are in:

10. Do you have an occupation, hobby or pastime that you would be willing to share with our children?

Additional comments or information about your child that you think might be helpful to us:

Date: