



## Child Profile

### Child Information

Name of Child: \_\_\_\_\_

Nickname: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ DOB: \_\_\_\_\_

Child's Primary Language: \_\_\_\_\_ Parent's Primary Language: \_\_\_\_\_

Home Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Child's Home Address: \_\_\_\_\_

Parent/Guardian Marital Status: \_\_\_\_\_ Primary Residence: \_\_\_\_\_

List the family members your child lives with- include names and ages of siblings:

\_\_\_\_\_

\_\_\_\_\_

Days that your child will be attending LAA: \_\_\_\_\_

Do you have any pets at home? \_\_\_\_\_

What's your family's heritage? Does your family have special traditions?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What Holidays does your family celebrate? How does your child participate in these celebrations?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does your child become tired or nap during the day (include time and how long)?

\_\_\_\_\_

How does your child indicate bathroom needs (special words)?

\_\_\_\_\_

Favorite foods?

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Foods Refused? \_\_\_\_\_

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Fears?

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How do you comfort your child? \_\_\_\_\_

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How do you discipline your child? \_\_\_\_\_

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Anything else you would like us to know about your child?

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Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_