



Finding Me Now Childcare Center

Enrollment Profile

Child's Name _____

Birthdate _____

Likes to be called _____

Household Members		
Name	Age	Relationship

Important Playmates	
Name	Age

Previous Out of Home Group Experiences			
Name Of Program	Type (ie. Child Care, Preschool, Sunday School)	Length of Time in Program	On a scale of 1 to 10 (with 10 being extremely positive) rate your child's experience.

If an above experience was negative, please describe concerns your child may have because of it?

Circle the item in each row below that best describes your child

Light Eater	Moderate Eater	Heavy Eater
Prefers Playing Alone	Shows No Preference	Prefers Playing with Others
Introverted	Balanced	Extroverted
Not Used to a P.M. Nap	Usually takes a short nap	Naps for at least 60 minutes

If any, what fears does your child have?

Briefly explain any health problems or handicaps your child may have.

How does your child respond to praise?

Is your child able to openly show affection?

How would you describe your child's personality?

Are there particular things in your child's personality that you would like encouraged or developed?

What do you hope your child will gain from this experience?

What are your concerns about this experience?

How does your child feel about coming to this center?

What, if any, concerns has your child expressed concerning coming to the center?

Is your child at all familiar with what will happen here?