

Fairmount Elementary School
24601 Fairmount Blvd.
Beachwood, OH 44122
216-292-2344

Parent Questionnaire

Name of child _____ Male _____ Female _____

What does your child prefer to be called? _____

Name of person completing form _____

Relationship to student _____

Date of birth _____ Today's date _____

Mother's name _____ Father's name _____

Child resides with: Mother _____ Father _____ Both _____ Other _____

Siblings Names

Ages (Please list in birth order)

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

Language(s) spoken at home: English _____ Other _____

Child's Personality

1. How would you describe your child's personality? _____

2. What are some of the things your child likes to do in his/her spare time? _____

Developmental History

1. Was your child premature? _____ If there were any birth complications, please describe: _____

2. At what age was your child:

*sitting alone _____ *walking alone _____

*speaking complete sentences _____ *toilet trained _____

Family History

1. What family activities or hobbies does your child particularly enjoy? _____

2. Which family member(s) is your child particularly close to? Please describe: _____

3. What responsibilities does your child have now? _____

4. Have there been any major changes in your child's life that may be affecting or have affected your child's growth or development? (death, divorce, serious illness, etc...) _____

3. Please list a brief history of care/school arrangements for your child from birth to present: (babysitting, family care, nursery school, preschool, day care, day camp, etc...)

Age _____ arrangement _____

Age _____ arrangement _____

Age _____ arrangement _____

Age _____ arrangement _____

Age _____ arrangement _____

Age _____ arrangement _____

Communication/Emotions

1. To what forms of discipline does your child best respond? _____

2. What things scare your child? _____
