



Kindergarten Information

Parents know their children well and teachers appreciate any information that can be shared about them. The information that you provide can help facilitate the transition to Kindergarten and make your child's Kindergarten experience successful. This information will be kept confidential.

Please complete the relevant sections of this questionnaire. Please complete this form and bring with you on June 2, 2022.

1. Child's Name: _____
Gender: _____
First: _____ Last: _____
Preferred Name: _____ Birth date: _____
2. Parents/Guardians Names:
Name: _____ Relationship: _____
Phone (Home) _____ (Cell) _____
E-mail: _____
Name: _____ Relationship: _____
Phone (Home) _____ (Cell) _____
E-mail: _____
3. Siblings' names and ages: _____
4. Names of others who live at your home: _____
5. Names of friends attending Braemar: _____
6. Would you prefer your child to be in a K/1 or K class? _____
7. Will your child be attending before or after school care while attending Kindergarten? Yes ____ No ____
Name of before/after school care centre: _____
8. Has your child had previous pre-school daycare and/or group experience? Yes ____ No ____
Part-time ____ or Full-time ____
9. Has your child attended Strong Start? Yes ____ No ____
10. What is your child looking forward to in Kindergarten?

11. What do you hope your child will accomplish this year? _____

12. In which areas do you expect your child will have success? _____

13. What are some of your child's special interests? _____

14. Does your child dress on their own? _____

15. What responsibilities does your child have at home?

16. Does your child have any allergies or other health issues? (Please describe)

17. Does your child have any food sensitivities or restrictions (e.g. gluten, vegetarian, vegan etc.)?

18. Does your child have any emotional concerns (e.g. attention, anxiety)?

19. Are there any areas that you suspect that your child may need special assistance?
(Social, emotional, academic, speech, etc.)

**** If you have any outside agency reports (psych-ed assessment, OT, SLP, Sunnyhill, etc.), please submit them to the school office as soon as possible.**

Parent/Guardian signature

Date