

KINDERGARTEN INFORMATION SHEET

Date _____

FAMILY INFORMATION

Child's Name _____ Birth Date _____

Address _____ Phone _____

Father's Name _____ Work Phone _____

Address _____

Type of Work _____ Work Hours _____

Mother's Name _____ Work Phone _____

Address _____

Type of Work _____ Work Hours _____

Parent email address: _____

GET ACQUAINTED INFORMATION

What is the usual bed time hour? _____

Does your child have any habits, such as thumb sucking, nail biting, etc.? _____ If yes, please describe

Does your child have any particular fears or nightmares? _____

Does your child use any expressions that may not be understood by others (such as "wee-wee" for urine)?

OVER 6

What is your usual method of reassuring and rewarding your child? _____

What is your "philosophy" of disciplining your child? _____

Does your child have allergies? _____

Is your child under any medication or therapy? _____

Please list names, relationships and ages of brothers and sisters and other members who live in the home

Have there been any major changes in the family, such as separation, divorce, death, illness or moving (within the past year) _____

Please list anything else about your child that you think we should be aware of in school. _____

Dear Parents of Students who will be in Kindergarten in September 2019,
Listed below are the school supplies to be purchased outside of school:

- 1 Bottle of glue (only white Elmer's glue 4 oz.)

- 1 Pocket folder (bottom pockets only) NO SIDE POCKETS

- 1 Pair of scissors (safety but sharp)

- 1 Large backpack

- 1 soft pencil case with zipper—no larger than 8" x 4"

- 1 smock

- 1 index card box (to be kept at home)

- 1 pkg. (100) index cards

- 1 lunch box

Please put your child's name on all items brought to school!

Thank you!

**KINDERGARTEN
LUNCH PARENTS 2019 - 2020**

(THIS DOES COUNT AS VOLUNTEER TIME)

Please help us during lunch time. Parents should arrive at 11:20 A.M. and plan on leaving at 12:00 P.M. The more parents that sign up to help, the less number of times anyone will need to come! You will receive a phone call at the end of the summer confirming your day. We will then send a calendar home with the schedule the last week of each month.

WE NEED YOUR HELP!!

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Lunch Parents 2019 - 2020

Parent _____

Phone Number _____

Please check the day that is best for you.
I can help on:

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Thank you so very much!!!!!!