South Shore Montessori

Your Child's Personal History Ages 24 Months and Up

This information is to be kept confidential. The purpose is to allow us to know your child's needs, background, and personality, so that we may make your child's adjustments to school a pleasant experience. If there are any questions that you feel are too personal, feel free to leave it blank.

Child's Name			
First Names and ages of sib		iddle e:	Last
Names and relations o	f other family membe		:
		_	
			Widowed
Is there any significan	t change in your child	's behavior after time	e with other parent?
Does other parent have	e permission to pick c	hild up from school?	
Is any language beside	es English spoken at h	ome?	What language?
Does your child have	any neighborhood plag	ymates?	
Has you child had any	previous experience i	in preschool, day car	e, MDO, etc.?
Was it a pleasant expe	rience?		
How do you expect yo	our child will react the	first day of school?_	
How does your child t	isually react to other c	hildren?	
Does your child have a	any particular interests	s or talents?	
Does your child have	any particular fears or	anxieties?	
Do you read to your cl	hild at home?	How often?_	
Does your child have	any mannerisms such	as thumbsucking, etc	2
What do you hope for	your child to accomp	lish in our school?	
Are you familiar with	the Montessori Metho	od?	
What is your child's po	ersonality in a group s	etting?	
How do you deal with	rewarding and punish	ning your child?	
Does your child throw	temper tantrums?		
			any more?
Describe your child in	your own words:		