

## *Help us understand your child better...*

### **Medical:**

Is your child receiving any medication or treatment on a regular basis? \_\_\_\_\_

Does your child have any handicaps or dietary restrictions? \_\_\_\_\_

Has your child had any serious illnesses? \_\_\_\_\_

Has your child had any accidents or operations? \_\_\_\_\_

### **Family:**

Place of birth? \_\_\_\_\_

Has your family moved recently? \_\_\_\_\_

Are there other relatives living in the family home? \_\_\_\_\_

Is your child adopted or a foster child? \_\_\_\_\_

Names and ages of brothers and sisters? \_\_\_\_\_

Marital status of parents? \_\_\_\_\_

### **Natural Abilities:**

What are some of your child's natural abilities or talents? \_\_\_\_\_

### **Concerns:**

Is there anything your child avoids or dislikes? \_\_\_\_\_

### **Schools:**

Has your child participated in any other structured program or other Montessori programs? \_\_\_\_\_

Does your child normally play with other children? What ages? \_\_\_\_\_

Have you recently read anything by or about Maria Montessori? \_\_\_\_\_

What do you want your child to gain from his/her Montessori experience? \_\_\_\_\_

How did you hear about *Montessori Academy of Glen Ellyn*? \_\_\_\_\_

What factors were important in deciding to enroll your child at *Montessori Academy of Glen Ellyn*? \_\_\_\_\_