

# Ocean Palms Elementary



Kindergarten Parent Questionnaire \_\_\_\_\_

School Year

Child's Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Gender: \_\_\_F \_\_\_M Age entering KG: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_

Child lives with : \_\_\_Both Parents \_\_\_Mother \_\_\_Father \_\_\_Legal Guardian

Mother: \_\_\_\_\_ Father: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

If legal Guardian, court order is required.

Legal Guardian: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Siblings: (Please list names, ages/grades)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please read each item and check the response that applies.

1. My child has participated in (you may check any that apply):

\_\_\_ Full-time Preschool/Daycare

\_\_\_ VPK

\_\_\_ Part-time Preschool/Daycare

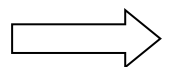
\_\_\_ ESE PreK

\_\_\_ In-home Child Care/Play group

Name of school: \_\_\_\_\_

2. How does your child feel about starting kindergarten? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



3. Is your child in any Special Programs? Does your child have an IEP? **Yes or No**

\_ESE \_504 \_ESOL/ELL \_Speech \_Language \_OT \_PT Other\_\_\_\_\_

4. Do you have concerns we should know about?:

- Health concerns/dietary needs/allergies: \_\_\_\_\_
- Emotional concerns such as fears/anxieties: \_\_\_\_\_  
\_\_\_\_\_

5. My child can read: \_Independently \_With Guidance \_Not yet

6. Recognizes letters: \_All \_Some \_No

7. Recites the alphabet: \_Yes \_No

8. Recognizes numbers: \_Yes \_Some \_No

9. Can count to: \_100+ \_100 \_50 \_20 \_Some

10. Identifies basic colors: \_Yes \_Some \_No

11. Identifies basic shapes: \_Yes \_Some \_No

12. Please list 4 positive things about your child.

1. \_\_\_\_\_

3. \_\_\_\_\_

2. \_\_\_\_\_

4. \_\_\_\_\_

13. Is there anything else you would like to share about your child?

\_\_\_\_\_

14. As a parent, do you have any hobbies, talents, resources to share with your child's class? \_\_\_\_\_

15. Do you give permission for your child's picture to be put on the teacher's website, per the SJCSO Release of Student Directory Information Options? \_Yes \_No

16. Do you give permission for your child's picture to be printed in the newspaper if his/her class is recognized by the media per the SJCSO Release of Student Directory Information Options? \_Yes \_No

**Thank you for taking the time to provide us with the above information; it will help us a great deal in meeting the needs of your child!**