PRINCE OF PEACE PRESCHOOL	
Returning Family Behavior and Social History Form	1

2016-2017

Because we care....

3625 SW Wanamaker Rd.

Topeka, KS 66614-4566

Patty Bullock, Director (785) 271-0913

Student Legal Name:					
Last	Fi	rst	Date of Birth	Sex	
Home Mailing Address:		Otto			
Street		City	City Zip Code		
Home Phone		Home C	Church/Religious Prefere	nce	
May we publish your home	phone number on our cla	ass roster? Yes	No		
	Student's Legal Gua	ardian(s)			
Name		Name			
Relationship to student		Relationship to student			
Occupation		Occupation			
Work Phone		Work Phone			
Cellular Phone		Cellular Phone			
Information on others living in your he	ome:				
Name:	Date of Birth:	e of Birth: Relationship:			
Name:	Date of Birth:	Relationship:			
Name:	Date of Birth:	Date of Birth: Relationship:			
Student's Parents: Married?	Separated?	Divorced?] Single?]	
Adults having legal rights with whom the	e student does not resi	de:			
Name:	Relationship:	Phone #:			
Address:	City:	State:	Zip:		
Custody/visiting arrangements:					
If child is adopted, age at adoption:	Does child	I know they are ad	lopted? Yes	No	
What method of behavior control is used	d in your home and ho	w does your child	react?		

Does your child:

Use any prescribed medication? (please list)

Have a recent hospitalization, surgery or emergency room visit?

Have vision, speech, hearing or communication problems? Explain:

Have a problem with being tired or overactive?

Have any emotional or behavioral problems?

Has your child ever been evaluated?

List any classes/group activities in which your child participates in addition to preschool. (i.e. Zoo School, Sunday School, soccer, dance, etc.)

List any goals you have for your child at preschool this year.

What concerns do you have about your child's development?

Additional Information: