



Getting to Know Me and My Family

Child's Name: _____ Date of Birth: _____

I like to be called by this name: _____

The people in my family are: _____

We speak this language(s) in our home: _____

Family traditions and customs that are important to my family are: _____

Holidays that my family celebrates (name of holiday and date) are: _____

My pet(s) is/are: _____

My favorite toys/games to play with are: _____

A song I like to sing is: _____

The things I'm a little bit afraid of are: _____

My favorite activities, characters, things to do (for example: dinosaurs, princesses, Dora, Legos, etc.) are: _____

When I'm outside I like to play on (for example: swing, trike, playground, with toys, other): _____

I like books about: _____

Here is the way I like to communicate (pictures, signs, words): _____

The foods I like to eat the most are: _____

The foods I don't like to eat are: _____

The thing that makes me most excited about starting my new school is: _____

The things that will make me comfortable in my new school are: _____



My family thinks the information below will help you to better understand my needs:

1. I may need this kind of help in the bathroom:

2. I may need this kind of help in getting dressed:

3. I may need this kind of help at lunch and snack time:

4. I may need this kind of help with walking, sitting, standing, or moving around:

5. When I'm playing outside, I might need a little help with:

6. This is how I play with other children:

7. When I get upset, what works best to help me calm down is:

Important medical information that you need to know about me:

- I have some allergies, and they are: _____
- I take this kind of medication: _____
- I have been in the hospital or treated for this medical condition: _____

My family would like more information about the following topics:

Other information my family wants to share:
