**Parent Assessment Form**

Each child has their own personality and responds to caregivers or experiences differently. Our aim at the V.E.P. is to make your child’s transition to our pre-school as smooth and stress-free as possible, both for you and your child.

In order to provide bespoke care and education, which are essential to nurturing healthy developmental growth, it is crucial we gain an insight into your child’s personality.

The parent assessment questionnaire below will help us to better understand your child and meet their holistic needs during the process of adaptation, based on your input.

**How would you describe your child?**

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**Does your child have any previous day-care experience?**

Yes No

**Does your child have any medical conditions? If so, please specify.**

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**Does your child have a chronic condition which requires regular or emergency medication? If so, please specify.**

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**Does your child have special dietary needs/ known allergies or intolerances? If so, please specify.**

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**Do you have any dietary preferences (restrictions) for your child due to ethical/cultural/religious reasons? If so, please specify.**

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**Does your child have a need which requires special care or support? If so, please specify.**

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**Does your child have communication needs or learning difficulties? If so, please specify.**

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**Is your child extremely shy ?**

Yes No

**Does your child find it extremely difficult to separate from you/ your partner?**

Yes No

**Other Information :**