

Adventures In Learning, Inc.

CHILD'S DEVELOPMENTAL RECORD

We believe parents are the primary educators of their children. We also support practices that build partnerships with families by recognizing and valuing the uniqueness of each and every family in our school. By gaining information about your child's developmental history, family traditions, and comfort routines we are able to create a family friendly atmosphere with a curriculum that is respectful to the uniqueness of each child and his/her family culture. We've included a section about your own interests and skills. Parent involvement is a wonderful way to build community and expand curriculum experiences for the children.

Child's Name _____

HEALTH:

1. Any birth difficulties? _____
Was birth premature? If so, how early? _____
2. Is child adopted? _____ If so, at what age? _____
3. List all allergies:
Food _____
Other _____
4. Is child susceptible to colds? _____
5. Does child tire easily? _____
6. Any identified disabilities? _____
7. How does child react to high body temperatures? _____
8. What arrangements can you make for your child in case of illness?
(Who do we contact first, second, third, if we can't reach you.) _____

9. Any special instructions if your child becomes ill? _____

ELIMINATION:

1. Does child indicated toilet needs? _____
2. What words does he/she use for elimination? _____
3. Does child need assistance at toileting? _____
4. How frequently does child need to toilet? _____
5. At what time of day does child have a bowel movement? _____

EATING:

1. Does child have a good appetite? _____
2. Any problems with eating? _____
3. Is child frequently upset during mealtimes? _____
4. Do you have any particular concerns about your child's eating habits? _____

NAPPING:

1. Does child have a regular nap time daily? _____
2. Does child fall asleep easily? _____
3. Length of nap _____
4. Does child have a favorite blanket or toy he/she takes to bed? _____

EMOTIONAL -- SOCIAL:

1. Discipline:
Parent methods used _____

Child's responses to discipline _____

2. How does child show anger? _____

3. How does child show tension? _____

4. Fears:
What is child afraid of? _____

How has fear been handled? _____

5. Has child played with other children? _____
own age _____ younger _____ older _____
6. How does child get along with other children? _____
Outside family _____
In own family _____

7. Has child had any previous group experience? _____

Where? _____

FAMILY HISTORY:

Answers in this section should reflect your CHILD'S history. If you have limited information such as in the case of adoption, please share any relevant information that applies to your child's current culture and your family goals. Mark unknown where applicable.

1. I was born in _____

My genetic culture/ethnic heritage is _____

The culture and ethnic heritage I am being taught (traditions, beliefs, and customs) about is _____

_____. The culture and ethnic heritage society identifies me as/is _____

My parents prefer that I be culturally and ethnically called _____

2. The primary language I speak in my home is _____

3. I live in _____ home/s.

In my home I have _____ (sisters and ages) and _____

(brothers and ages). The other members of my family who live with us are: _____

In my other home (if applicable) I have _____ (sisters and ages)

and _____ (brothers and ages). The other members of my family

who live with us are: _____

4. My mother's name is _____

She was born in (state or country) _____ on (date/year) _____

Her genetic cultural/ethnic heritage is _____

The cultural and ethnic heritage she was taught (traditions, beliefs and customs) were _____

_____. The culture and heritage society identifies her as _____

_____. She prefers to culturally and ethnically be called _____

5. My father's name is _____
He was born in (state or country) _____ on (date/year) _____
His genetic cultural/ethnic heritage is _____
The cultural and ethnic heritage he was taught (traditions, beliefs and customs) were _____
_____. The culture and heritage society identifies him as _____
_____. He prefers to culturally and ethnically be called _____

6. My mother's parents live or lived in (state or country) _____
They were born in (state or country) _____ and (state or county) _____

7. My father's parent's live or lived in (state or country) _____
and (state or county) _____
8. Did my great-grandparents come from another country? Which person/s and from which side of the family?
_____. Which country? _____
9. The special foods we eat, traditions, customs, and beliefs our family celebrate are _____

Our family would _____ or would not _____ be willing to share about one of our family's special
celebrations with other members of our learning community.
10. I want to tell you a story about a special relative who is important to our Family.

11. My favorite playthings are: _____

12. Some unusual experiences I've had are: _____

13. Some talents, hobbies, interests, or skills my parents might like to share with my friends at school are: _____

14. To the parent: Have there been any difficulties or crisis in your family, such as accidents, medical problems or any changes in the family. such as divorce or death, that may have affected the emotional well-being of your child?