



Kids R Kids of Alpharetta
3455 Webb Bridge Road · Alpharetta, GA 30005
770-442-3400 · www.kidskids28alpharetta.com

Child Profile

Child's Full Name: _____ Date of Birth: ___/___/___

Parent/Guardian's Name: _____ (Please Print)

This profile will stay with your child. As your child grows and develops, changes should be noted or added to this form to keep your child's teachers in touch with the growth and development your child has made. We need your input on any changes taking place outside of school that may have an effect on your child while in our care. Thank you for your cooperation.

1. Has your child had previous preschool experiences? Yes No

Explain: _____

2. What would you like most for your child to experience with Kids 'R' Kids?[®]

3. What does your child most enjoy doing?

4. Does your child have any fears?

5. Do you consider your child shy or outgoing?

6. What are your child's favorite toys?

7. About what things does your child express the most curiosity?

8. Does your child play with other children? Yes No

9. List the names and ages of other children in your family.

10. What words are spoken in your home for toileting?



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11. Does your child take a nap? Yes No How long? _____

12. Does your child need a favorite item (such as a blanket or stuffed animal) for naptime?

Yes No If yes, please describe:

13. How many hours of sleep does your child usually receive at night? _____

14. Does your child have allergies? Yes No If yes, what are they?

15. Does your child have any special medical or physical needs? Yes No
If so, please explain:

16. Do you have a special interest or hobby you would like to share with the children?

17. Are you available to help with field trips or other special events? Yes No

18. Does anyone else care for your children? (Grandparents, Neighbors, etc.) Yes No
If so, who?

19. What language(s) is (are) spoken in your home? _____

20. Authorized persons to pick up your child:

1. _____ Relationship: _____

2. _____ Relationship: _____

3. _____ Relationship: _____

21. Is there anything else that you would like us to know about your child or the care of your child?



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Parent/Guardian Signature

____/____/____
Date

