## The Yellow School at MDPC

11612 Memorial Drive
Houston, Texas 77024
713-784-0820
INTRODUCTORY INFORMATION
Name of Child $\square$ Nickname $\square$ Gender $\square$ Teacher $\square$
Date of Birth $\square$ Preferred Email Contact $\square$
Home Phone $\square$

Tell us about your family (siblings, grandparents, and other extended family). Please include the names of siblings.

Who cares for your child when you are away?
Does your family have any pets? If so, what kinds? What are their names?

What are some of your child's favorite toys and activities?

Does your child have any fears? If so, what are they?
$\square$
What prompts your child to lose their temper?
$\square$
What seems to be the most common issue between parent and child?

## What seems to be the most common issue beween parent and child

What methods of discipline do you use?

Does your child speak in complete sentences?
Has your child had any severe injuries? If so, when?
Any difficulty hearing?
Vision problems?
Any significant difficulties at birth?

Does your child have any allergies? If so, what are they?

How should we respond if your child were to have an allergic reaction?

Does your child have an EpiPen? $\square$ *If yes, we need 2 at the school*
Is your child taking any medication? $\square$
Are there any potential side effects? $\square$
What is your child's average night's sleep? $\square$ P.M. to $\square$ A.M. Naps?

Attitude towards going to bed?
Does your child dress themselves? $\square$
Does your child feed themselves? $\square$ Does your child eat willingly?
Has your child attended school, daycare, or playgroups before? $\square$
Do you have any concerns about your child?
$\square$
Is your child fully potty trained? $\square$
*They must be fully potty trained to attend Yellow School.
What words do you use for bathroom functions?
Tell us about your child (demeanor, likes or dislikes, etc.).

Thanks!


