

Country Day School
EARLY CHILDHOOD ADMISSION
Questionnaire
Early Childhood - Grade 2

Name: _____ Date of Birth: _____

Age: _____ Grade Level: _____

Father's Name: _____ Mother's Maiden name: _____

Questionnaire filled out by: _____ Date: _____

DEVELOPMENTAL INFORMATION

Family information (any special aspects):

Pregnancy/Birth: _____

Breast feeding: _____

Child walked (give age): _____

Toilet trained: _____

Bottle-fed until : _____

First words: _____

Phrases: _____

Complete language use: _____

Speech problems: _____

Feeding habits: _____

Significant events in child's life (moves, illnesses, etc.): _____

Activities/Hobbies: _____

Previous schooling (list most recent first)

School: _____ From/To: _____

School: _____ From/To: _____

How long has your child lived in Costa Rica? _____

How has the family adjusted to Costa Rica? _____

What is the expected length of your stay in Costa Rica? _____

