



**THE MEADOWS SCHOOL
CHILD HISTORY FORM
BEGINNING SCHOOL**

Applying for school year _____

CHILD'S NAME _____ Age _____ Date of Birth _____

Nickname or other name preferred for use by School _____

Please list all the members of the child's family:

Name

Relationship to Child

Age

<u>Name</u>	<u>Relationship to Child</u>	<u>Age</u>

If divorced, do you have open communication with spouse?

_____ excellent _____ good _____ neutral _____ hostile _____ no contact

Who has legal custody? _____ joint _____ father _____ mother _____ grandparents

If joint, please explain arrangements _____

Did this child previously attend another preschool or nursery school?

_____ No _____ Yes, Name of School _____

Was there significant separation anxiety at previous nursery or preschool? _____ No _____ Yes

Language spoken in your home: _____ English _____ Spanish _____ Japanese _____ Chinese

_____ French _____ Italian _____ Russian _____ Other, please list _____

Is your child left-handed? _____ Is either parent left-handed? _____

(OVER)

