

Laconia Christian Academy

1386 Meredith Center Rd. ♦ Laconia, NH 03246 ♦ (603) 524-3250 ♦ Fax: (603) 524-3285

FORM
B

PRESCHOOL/ KINDERGARTEN PARENT QUESTIONNAIRE

Name of applicant: _____ Applying for school year: _____

1. Program you wish your child to enter: Preschool 3-year-old Preschool 4-year-old Kindergarten
2. Will your child be participating in the Extended Day Program? (See separate enrollment form "X") Yes No
3. Why do you want to enroll your child in Laconia Christian Academy?

4. Does your child need assistance toileting? Yes No

5. Does your child have health or behavior issues? Yes No

If "Yes," explain: _____

6. Does your child have any extreme fears? Yes No

If "Yes," explain: _____

7. Does your child take medication? Yes No

If "Yes," explain: _____

8. Does your child have any speech problems or delays and, if so, are they being monitored? Yes No

If "Yes," explain: _____

9. Is your child currently involved in any other special programs or receiving any special services from your school district? Yes No

From a private source? Yes No

If "Yes," explain: _____

10. Are there any special custody provisions? (If "Yes," please provide documentation.) Yes No

11. My child may be photographed at school for bulletin board displays and yearbook. Yes No

Please complete other side.

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PRESCHOOL/ KINDERGARTEN PARENT QUESTIONNAIRE (continued)

12. Please circle one number for each of the following statements, with “1” representing “never” and “6” representing “always.”

- a. My child dresses himself or herself. 1 2 3 4 5 6
- b. My child uses the bathroom unassisted. 1 2 3 4 5 6
- c. My child articulates his/her needs clearly. 1 2 3 4 5 6
- d. My child zips. 1 2 3 4 5 6
- e. My child buttons. 1 2 3 4 5 6
- f. My child snaps. 1 2 3 4 5 6
- g. My child has frequent opportunity to play with other children. 1 2 3 4 5 6
- h. My child plays well alone. 1 2 3 4 5 6
- i. My child initiates and completes self-selected tasks. 1 2 3 4 5 6
- j. My child completes tasks as directed. 1 2 3 4 5 6
- k. My child plays interactively with other children. 1 2 3 4 5 6
- l. My child uses aggressive behavior with other children. 1 2 3 4 5 6

13. Describe a typical day for your child.

14. Please share any other information that you feel will help the Admissions Committee become better acquainted with your child. It is important that you discuss particular strengths and weaknesses with us so we gain a better understanding of your child.

15. Please write a brief statement describing your involvement in your church.

Parent/ Guardian signature: _____ Date: _____

Print name: _____