GIVING TREE MONTESSORI SCHOOL PARENT INFORMATION SHEET

				MALE / FEMAL	E
LAST NAME	FIRST	MIDDLE		3	
STREET ADDRESS	CITY	7	ZIP	DATE OF BIRTH	 H
Father's/Guardian's/Do	mestic Partner's				
LAST NAME	First	1	MI	Cell phone	
Occupation	Employer		Work phone (This e-mail will be added to our school		
E-Mail Address:				notification list.)	1 School
Mother's/Guardian's/Do	omestic Partner's				
LAST NAME	First	1	MI	Cell phone	
BLD I I I I I I I	1130			oen phone	
Occupation	Employer			Work phone	
E-Mail Address:	(This e-mail will be added to our school				
				notification list.)	
Nanny / Grandparent / G	Other person responsible fo	r student			
LAST NAME	First	1	MI	Cell phone	
	•			con phone	
	ized to take child from the f leave with any other person w		thorization fro	om parent or guardian.	
	F			F	
NAME	RELATIONSHIP	NAME		RELATIONSHIP	_
111111111111111111111111111111111111111	10211101101111	11121122			
NAME	RELATIONSHIP			RELATIONSHIP	
		NAME			
Names of Siblings	Date of Birth	Names	of Siblings	Date of Birth	
How did you hear abou	at Giving Tree Montessor	i School?			
Personal Reference			lp Review _		
Bay Area Parent	Website	Ot	her		

Please take a moment to answer a few questions so that we may use this information to better familiarize ourselves with your child's unique needs. Giving Tree Montessori staff will use this information ensure the care and safety of your child.

GIVING TREE MONTESSORI SCHOOL PARENT INFORMATION SHEET

					_
LAST NAME	FIRST	MIDDLE	TEACHER		
Does your child have a	ny dietary restrictions (ie: veg	getarian, no pork, no beef, no	juice, etc) Y	ES	NO
Explain:					
Does your child use an	epi pen at home?		Y	ES	NO
If yes, please provide o	ne to the school if necessary.				
For which type of allers	gy?				
Was your child diagnos	sed with asthma?		Y	ES	NO
Does your child use an				ES	NO
How often? For what (i	.e.: allergies / asthma)?				
					
Does your child use a n	nebulizer at home?		Y	ES	NO
How often?					
Is your child potty train	ned?		Y	ES	NO
How long has your chil	d been out of pull ups?				
Are you currently potty	training at home?		Y	ES	NO
How long have you bee	en potty training?				
777 4 6 11 1	1 1 1 0				
What are your family s	phrases or key words for pott	ty training?			
How does your child in	dicate he/she needs to use the	e toilet?			

At Giving Tree Montessori, we work to assist you in your potty training efforts. We do not however, potty-train or initiate this process for you. We will work together with your family to finish and complete this process in a joint effort approach. Our goal is to provide consistency and encouragement to minimize any confusion during their transition to underpants. We have additionally outlined some helpful ways to do this and provide you with concrete information as to what you can expect in our Transitional Potty Training Memo found in the tour packet.

Thank you, Giving Tree Montessori Staff