

Student Information Card School Bag Supplies Tell Us About

Student Information Card 2022-23

Student Name _____ DOB _____ Class (Days) _____
Allergies & or Food Restrictions __ N__ Y Please list: _____
Address _____ City _____ IL Zip _____
Home Phone _____ Main Email _____
First contact (ex. Mom) _____ Phone _____
Emergency Contact (other than parent): Name _____
Phone _____ Relationship _____
Mom's name: _____ Dad's name: _____
Cell: _____ Cell: _____
Email: _____ Email: _____

Please circle:

	Mom		Dad	
Can you receive Text message?	Yes	No	Yes	No
Can you receive Photo messages?	Yes	No	Yes	No
Allowed to receive either through the day?	Yes	No	Yes	No

Please check all applicable: JFK has permission to post my child's photo on _____ Facebook
_____ Website _____ Newsletter _____ Advertising

Additional Information for Teachers:

Just For Kids School Bag (2022-23)

The first name and last initial will be written on the bag. Please indicate how you would like your child's first name to appear.

Child's first and last name _____ Preschool Class _____

I would like my child's name to appear as: My Child's First Name _____ Last Initial _____

_____ I have included the \$5 for the school bag

Date Paid _____ Payment Method _____ Amount Paid _____

Supply List 2022-23

Dear Parents,

At the beginning of the school year and after winter break, we ask each family to bring in a few items from the requested supply list. Please find your child's class and the corresponding supplies. Please drop off the supplies with your paperwork by August 1st. THANK YOU!

Infant (Garden Room)-2 cases of baby wipes

Toddler (Barn Room)-2 cases of baby wipes

2 Years Old (Farm Room)-2 containers of baby wipes and 2 boxes of Kleenex

3 Years Old (Safari Room)-2 containers of baby wipes and Sharpie Permanent Markers Fine Point 8 pack

4/5 Pre-K (UTS Room)- 2 containers of Clorox wipes & Expo dry erase markers- assorted pack

TELL US ABOUT YOUR INFANT & TODDLERS 2022-2023

Please complete the following information to help us get to know your child better. **Just For KIDS Preschool and Learning Center** is excited to get to know your child so we can help encourage, stimulate, and develop your child's growth.

Child's registered program/class _____

Child's First and Last Name _____ Nickname _____

Birth date _____ my child is the... Oldest Middle Youngest; How many siblings are there? _____

Is your child adopted? Yes ___ No ___ If yes, do they know? Yes ___ No ___ My child is: Right ___ Left ___ handed

What language(s) is spoken in your home? _____

Any health concerns? If yes, explain: _____

Any food/or seasonal allergies? Explain: _____

Favorite foods? _____ Least? _____

I would characterize my child as ___ friendly ___ shy ___ active ___ sensitive ___ aggressive Other: _____

Does your child know any children in his/her class? Yes ___ No ___

Does your child have a regular bedtime? Yes/Time _____ No _____

How does your child like to be comforted? _____

How does your child comfort him/herself? _____

What would you like your child to gain from their experience this year? _____

Has your child met developmental milestones? Yes _____ No _____

Do you have any developmental concerns about your child? If yes, please explain: _____

What family or cultural traditions are important in your home? _____

Parent/Guardian Signature: _____ Date: _____

Infant Schedule

Child's Name: _____ DOB _____

Feeding: Bottles: _____ breast _____ formula _____ milk

Amount: _____ Frequency: _____

Food: _____ baby _____ table

Amount: _____ Frequency: _____

Naps: Frequency: _____

Length of time: _____