



**RIO GRANDE
SCHOOL**

EARLY CHILDHOOD PARENT QUESTIONNAIRE

Please fill out the following information and return to Rio Grande School.

Student Name _____ Date of Birth _____

Parent(s) Name _____

Phone Number _____ E-mail _____

How much pre-school experience has your child had up until now? Where?

Have there been any recent family changes? (i.e. moving, divorce, death, etc.)

What are you looking for in an early childhood education program?

What would you like us to know about your child? Please describe any special interests, talents, strengths, fears or concerns.