



Wildwood Park District
CHILD'S PERSONAL HISTORY

(Please Print)

Child's Last Name First Name

Child's Nickname (if applicable) Birthdate Circle: Male Female

FAMILY / HOME

Parent/Guardian Name Occupation

Business Name/Address

Business Phone

Work Hours Mon Tue Wed Thu Fri

Parent/Guardian Name Occupation

Business Name/Address

Business Phone Work Hours Mon Tue Wed Thu Fri

Do you travel for business? If yes, how often?

Parent's Marital Status: Single Married Separated Divorced Other:

If divorced or separated, which parent does your child reside with?

How often does child see other parent?

Table with 5 columns: Name of Sibling(s), M/F, Date of Birth, Preschool Attended, Current School / Grade

Does anyone else live in your home? YES NO If yes, name/relationship to child:

Is ENGLISH your child's primary language? YES NO If no, what language does your child speak?

Are any other languages spoken in the home? YES NO If yes, what language?

MEDICAL / PERSONAL HISTORY

Has your child had any injuries, surgeries or recent personal family traumas? YES NO

If yes, please explain:

Is your child prone to certain illnesses or have any conditions we should be aware of? YES NO

If yes, please explain:

Does your child take any medication regularly? YES NO

If yes, please list and explain:

Will your child need to take medications while at this program? YES * NO * *If yes, must complete Medical Distribution Form*

If yes, please list and explain:

Are Park District provided snacks a potential concern? YES NO

If yes, please explain:

ALLERGIES: Complete below if your child has allergies

| Allergy to | Contact or Ingestion | Symptoms | Medication Needed | Life Threatening? |
|------------|----------------------|----------|-------------------|-------------------|
| <hr/> | <hr/> | <hr/> | <hr/> | <hr/> |
| <hr/> | <hr/> | <hr/> | <hr/> | <hr/> |

SOCIAL EMOTIONAL HISTORY

How would you describe your child's temperament/personality?

Are there specific situations in which your child tends to become upset, angry, scared, or withdrawn?

Describe your child's attitude toward other adults? *(i.e., friendly, outgoing, cautious, etc.)*

How would you describe your child's play? *(i.e., self-initiated, plays alone, prefers to play with others, active, quiet, etc.)*

Is there any other information that you would like to share with the staff?

Parent/Guardian Signature

Date