

Admissions Information

MMCH 2017/2018

Child's Name: _____

Does your child have previous school or day care experience? Please list name and address:

What social experience does your child have? (Play-groups, swimming, gym)

In what ways is your child comforted when they are upset? _____

Is your child able to care for his/her toileting needs? _____

Is your child in the habit of taking a nap? When? _____

Does your child play outside on a regular basis? _____

How much "screen time" does your child have in a typical week? _____

Please list some of your child's interests: _____

Does your child have siblings? _____ If so, what are their names?

Name _____ Age _____

Name _____ Age _____

Do you have any concerns about your child's adjustment to the classroom? Please check all that apply and elaborate as needed:

- Toileting _____
- Separation from Parents _____
- Ability to participate in Group Activities (i.e. circle time) _____
- Verbal Skills (ability to communicate needs) _____
- Social Interaction with Peers _____
- Sensory Issues _____

Is there anything else that you feel is important for the school to be aware of?

How did you hear about Maine Mountain Children's House?

- Parent of an MMCH student _____
- A friend _____ (specify name)
- Newspaper _____ (specify name)
- Website _____ (specify site)
- Social Media _____ (specify)
- Flyer/Poster _____
- Other (please specify) _____