

Child and Family Intake Questionnaire

A child and family intake questionnaire is a tool to help engage with families from the start of their relationship with their early years program. The following are potential questions for an intake questionnaire for new families. Our hope is for programs to consider the benefits to using an intake form to help build relationship with parents. These sample questions could be the starting point for programs to develop their own intake questionnaire. For programs who do already use an intake questionnaire, we hope that these sample questions will help them reflect on their current intake questionnaire and make any necessary additions or adjustments for a more effective family engagement tool.

General Questions

1. Has your child been in child care before? If yes, what type of child care?
2. Has your child visited a play-based child and family program? Nursery School?
3. My child is interested in/likes to play with _____
4. My child does not like (pets/insects/loud noises etc)_____
5. How sensitive is your child to sounds, taste and touch? Do they like to get their hands dirty or are they hesitant to new sensory experiences?
6. How active is your child? Do they usually choose quiet activities (reading, art) or do they prefer to be active (running, sports)?
7. How does your child approach new activities/new people/changes in their environment?
8. What are meal times like at your house? Do you have any mealtime routines?
9. Anything else that you would like to tell us about your child that you think is important for us to know.

Infant and Toddler Questions

1. Does your child like to feed themselves? Yes/No
2. Would you consider your child a big eater/smaller eater/picky eater?
3. What foods are regularly eaten in your home?
4. Does your child use a pacifier? Yes/No/Only at sleep
5. Does your child have a comfort item (blanket/stuffy/pacifier)? Yes/No/Only at Sleep. If yes, what is it?
6. Tell us about your child's nap. Time: Length:
7. How does your child like to be comforted when they are upset?
8. Tell us about your child's social interactions.

Preschool Questions

1. Would you consider your child a big eater/smaller eater/picky eater?
2. Does your child have a comfort item (blanket/stuffy)? Yes/No/Only at Sleep. If yes, what is it?
3. Tell us about your child's nap. Time: Length:
4. How much toileting support does your child required? Reminder to go the washroom/special words/not toilet trained.
5. Does your child dress independently or do they require assistance?
6. How does your child like to be comforted when they are upset?
7. Has your child had any interactions with other children?

School Age Questions

1. Has your child begun to build social relationships with other children? Yes/No
2. Does your child have any special friends – real or imaginary – that they may talk about?
3. How does your child generally adapt to new situations? Does your child require support from an adult to join new activity/group situation?
4. Does your child use the washroom independently? Yes/No If no, tell us about any toileting needs your child might have?
5. Does your child require support to gather belongings for home? Yes/No

Getting to Know your Family

1. Our family is from _____City_____Country
2. Do you have any special traditions that you participate in as a family? Yes/No
3. If yes, what are your traditions?
4. Would you be willing to share with our program your family's traditions? Yes/No
5. How can we support your family's traditions?
6. What is a favorite activity you do as a family? Go to the park/library/sports
7. Who are the significant people/pets in your child's life? Feel free to draw a picture of your family or your family tree?
8. What topics are you, as a parent/caregiver, interested in learning more about?
9. Is there a special family recipe that you would be willing to share with us? Yes/No
10. Do you have items (clothing, instruments, etc.) that reflect your family's culture that you would be willing to share with our program? Yes/No
11. What are you hoping our program will provide for your child and for your family?
12. What are your hopes for your child?