

2020-21 End of Year Questionnaire for Families and Caregivers

A Note to Families/Caregivers:

This end of year questionnaire will help your child transition to a new classroom community next school year. You hold important information about your child as their first teacher and best advocate. **When you complete this form, we encourage you to keep this questionnaire and share this information with your child's next teaching team.** This can enhance your child's learning experience and your partnership in your child's education. The more your child's teaching team understands about your child and family, the better they can support your child and develop a strong partnership with you.

We have included a note to your child's future teaching team to provide more information about this form. Feel free to skip any questions that you don't feel comfortable answering.

A Note to Future Teaching Teams:

Below you will find information from families about their child's 2020-21 school year. With many children spending more time at home with their caregivers this past year, this document provides families/caregivers with an opportunity to share with you information about their child, their favorite things about the 2020-21 school year, and their hopes and aspirations for their child for the 2021-22 school year.

Building trusting relationships with families and their children begins with getting to know them. Young children learn in the context of relationships with trusted adults. The responses in this questionnaire are a way to start building those relationships, both with children and families. As we know, families are children's first teachers and the experts on their children. The information they provide can be used alongside other beginning of the year documents at your school, including "getting to know you" surveys, to help you and your teaching team create welcoming, respectful partnerships with families and lay a strong foundation for learning throughout the year.

Family/Caregiver Questionnaire

PART 1: About Your Child

Your Name:

Child's Name:

1. What does your child prefer to be called? What would you want a teacher to know about your child's name?
2. In what language(s) does your child communicate comfortably?
3. What is the name of the early childhood program your child attended during the 2020-2021 school year?
4. What are some of your favorite things about your child?
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5. What are some of your child's favorite things to do (for example: drawing, reading stories, playing pretend, playing outside)?
6. Does your child have a favorite toy or stuffed animal?
7. What have you noticed your child likes best and least about their early childhood program? (For example: rest time, the playground, read alouds)?
 - Likes best:

 - Likes least:

8. Does your child need support with any of the following? Please check all that apply, and describe any physical, emotional, behavioral, or learning supports that your child will benefit from as the school year progresses.

Areas for Support	Support Needed?	Notes About Support
Toileting	Yes / No	Notes:
Napping	Yes / No	Notes:
Allergies (including food allergies)	Yes / No	Notes:
Dressing	Yes / No	Notes:
Other (please explain)		Notes:

9. How did your child experience remote, in-person, or blended learning? Please write a few sentences below:

10. Please let us know anything else about your child that will help their next teaching team care for them effectively:

