



208 W. Broadway Street
Montour Falls, NY 14865

Phone: 607-535-8908

Fax: 607-535-4199

www.myplace-aplc.com

IS YOUR CHILD NEW TO OUR PROGRAM?

Welcome to My Place

PLEASE HELP US GET TO KNOW YOUR CHILD

In order for us to understand and communicate effectively with your child it is important for us to know his/her likes and dislikes, special interest, and favorite activities. We also use following information for program planning and development. We value your feedback and expectations.

Child's Name _____ Nickname _____

My child's favorites:

Toys: _____ Games: _____

Snack: _____ Activity: _____

Special interest or hobbies: _____

Our family enjoys doing: _____

My child dislikes: _____

When upset, my child: _____

When upset, my child responds best to: _____

When my child wants attention, he/she will: _____

Siblings' names and ages: _____

What would you like each staff to know about your child?

Is there any other information that you feel would be helpful to us?

In relation to your child, what are your of expectations of My Place?
