



BBC PRESCHOOL PARENT INFORMATION FORM

This form is to get to know the parents a little bit better. Have a better understand of extended family the children talk about. This will also be used to help the children know things about you and use in daily activities or special art projects. Please feel free to add any other information on the backside of this sheet. Thanks!

FATHER/MALE ROLE MODEL INFORMATION

First & Last Name _____

Are you the: Birth Father Stepfather Adoptive Father Grandfather Live In Boyfriend

Marital Status: _____

Father's Cell Phone/Pager _____

Father's Email _____

Father's Birthday _____

Father's Mother Name _____

Father's Mother Birth Date _____ (day/month)

Father's Father Name _____

Father's Father Birth Date _____ (day/month)

Father's Siblings & Birth Dates _____ (day/month)

Are you the: Only, Oldest, Middle, Youngest child in Family? (Circle one)

Hometown (Where you grew up) _____

Father's Allergies _____

Father's Religious Affiliation _____

Place of Employment _____

Work Phone _____ Regular Working Hours _____

How long is your commute to work? _____

Do you: Drive Yourself Carpool Take the Bus Bike Walk Work From Home

Describe what you do all day. I will use this information to explain to the children when they want to know what their parents do at work or school.

Where did you go to college? What is your favorite college team (if you have one)? What are their school colors? I will use this information for when we have Sports Week and Team Spirit Week. Also list any sports you played in high school and college.

Please do the same for Professional Sporting Teams.

Father's Favorite Color(s) _____

Father's Favorite Food(s) _____

Father's Favorite Place to Eat Out _____

Father's Favorite Hobbies/Interest, outside of being a father! _____

Father's Favorite Vacation Spot as a Family _____

MOTHER/FEMALE ROLE MODEL INFORMATION

First & Last Name _____

Are you the: Birth Mother Stepmother Adoptive Mother Grandmother Live In Girlfriend

Marital Status: _____

Mother's Cell Phone/Pager _____

Mother's Email _____

Mother's Birthday _____

Mother's Mother Name _____

Mother's Mother Birth Date _____ (day/month)

Mother's Father Name _____

Mother's Father Birth Date _____ (day/month)

Mother's Siblings & Birth Date _____ (day/month)

Are you the: Only, Oldest, Middle, Youngest child in Family? (Circle one)

Hometown (Where you grew up) _____

Mother's Allergies _____

Mother's Religious Affiliation _____

Place of Employment _____

Work Phone _____ Regular Working Hours _____

How long is your commute to work? _____

Do you: Drive Yourself Carpool Take the Bus Bike Walk Work From Home

Mother – Describe what you do all day. I will use this information to explain to the children when they want to know what their parents do at work or school.

Where did you go to college or what is your favorite college team? What are their school colors? I will use this information for when we have Sports Week and Team Spirit Week. Also list any sports you played in high school and college.

Please do the same for Professional Sporting Teams.

Mother's Favorite Color(s) _____

Mother's Favorite Foods _____

Mother's Favorite Place to Eat Out _____

Mother's Favorite Flower(s) _____

Mother's Favorite Hobbies/Interest, outside of being a mother! _____

Mother's Favorite Vacation Spot as a Family _____

Please make copies and have step parents or parents that live outside of the child's home fill this out as well. Thanks.