

## DEVELOPMENTAL HISTORY FORM



Child's Name: \_\_\_\_\_  
first middle last Nickname

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_ Sex: ☐ M ☐ F

Languages spoken at home: \_\_\_\_\_

Please tell us more about the people living at home, including parents, guardians, step-parents, partners, etc.

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Occupation: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Occupation: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Occupation: \_\_\_\_\_

How long has your family lived in Seattle? \_\_\_\_\_

Where else has your family lived? \_\_\_\_\_

Please describe some of your favorite activities to do together as a family. Are there things from home that are special to your family that you might be willing to share with your child's class?

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Please describe the beliefs and values that are important to your family, including any religious/philosophical beliefs, special events, celebrations (such as holidays, traditions, rituals, etc.) that are a part of your child's home culture:

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If your family has a shared custody arrangement, or your child regularly lives at more than one residence, please describe these arrangements below, including what days and times your child is usually at one home or the other, and who lives with the child at each residence

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Is there anything else you'd like us to know about your family? (for example: family pets, sibling relationships, adoption, relatives living nearby, upcoming changes in family life, usual parental roles...)

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**Social and Emotional History:**

Please describe your child's play (for example: favorite toys and activities, does s/he prefer to play alone or with others, does s/he have special playtimes with parents, what spaces and materials are available for play at home...):

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Please describe your child's self-help skills (for example: what can s/he do by her/himself what does s/he need help with – dressing, washing eating putting on shoes, putting away toys...):

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Please describe your child's emotional behavior (for example: do they have any fears, how do they react to change, how do they express frustration or anger, what is comforting to them...):

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Please describe your family's approach to discipline (for example: methods used at home, particular words or phrases or actions used, how does your child respond, which parent is responsible for discipline, are there certain consequences for particular behaviors...):

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Please describe your child's experience with other children (for example: is this your child's first group experience, do children come to visit, do you visit other children, are there friends in the neighborhood...):

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What things please you most about your child? What do you perceive to be their strengths and assets?

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What things concern you most about your child?

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What are your hopes and dreams for your child?

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**Health History:**

Please describe your child's eating (for example: mealtimes, special rituals or food likes/dislikes, dietary choices or restrictions, etc.):

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Please describe your child's nap time routine (for example: time, the length of the nap, cozy animal specific challenges):

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Please describe any other concerns you may have about your child's physical development (for example: coordination, hearing, vision...):

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Please describe any other significant health information about your child or your family (for example serious illness, surgery or hospitalization):

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### Home Language Information:

In order to create an inclusive, diverse and enriching program, we would appreciate the opportunity to incorporate your child's home language into our program. Children are at the center of our curriculum we want their home life to be reflected in our environment by hearing their home language. Exposure to multiple languages is also beneficial for all children because it fosters language acquisition and literacy skills.

If you speak a language other than English at home, please take a moment to translate these few words and phrases for us. Please write the words/phrases in the alphabet which is used in your language, and also spell the words/phrases phonetically so that our teachers may correctly pronounce them.

Hello: \_\_\_\_\_

Goodbye: \_\_\_\_\_

Please: \_\_\_\_\_

Thank You: \_\_\_\_\_

More: \_\_\_\_\_

All done/finished: \_\_\_\_\_

Bathroom/potty: \_\_\_\_\_

Outside: \_\_\_\_\_

Snack: \_\_\_\_\_

Lunch: \_\_\_\_\_

Mother/Mommy: \_\_\_\_\_

Father/Daddy: \_\_\_\_\_

Sister: \_\_\_\_\_

Brother: \_\_\_\_\_

Grandmother/Grandma: \_\_\_\_\_

Grandfather/Grandpa: \_\_\_\_\_

Friend: \_\_\_\_\_

Teacher: \_\_\_\_\_

Girl: \_\_\_\_\_

Boy: \_\_\_\_\_

One: \_\_\_\_\_

Two: \_\_\_\_\_

Three: \_\_\_\_\_

Four: \_\_\_\_\_

Five: \_\_\_\_\_

Six: \_\_\_\_\_

Seven: \_\_\_\_\_

Eight: \_\_\_\_\_

Nine: \_\_\_\_\_

Ten: \_\_\_\_\_

Play: \_\_\_\_\_

Nap: \_\_\_\_\_

Go for a walk: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Would you like to play with me?: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_