

So that we may better get to know you and your child, please answer the following questions.

1. Does your child have siblings? If so, please tell us their names and birthdates.

2. Has your child had previous educational experience? N Y

If yes, at what school or preschool? _____

3. Who helps in rearing this child?

4. Does your child have any developmental delays, serious health conditions or surgeries?
Describe briefly. (Before school begins, you will complete a more detailed medical statement.)

5. Does your child attend religious services, Sunday school, or any religious instruction? If so,
where? _____

6. What are some of your child's interests (toys, books, hobbies, activities)?

7. How did you hear about Immaculate Conception School?

8. Please tell us about your areas of expertise – hobbies, skills – that you would be
interested in sharing with the students, teachers or administration.

9. Do you intend to send your child to IC for ___preschool only? ___ preschool and elementary?

10. If referred to IC by a present family or alumni student or parent of IC, could you tell us?
We would like to acknowledge our supporters!

Parent Signature

Date