

**JACQUES MEMORIAL ELEMENTARY SCHOOL
MILFORD, NEW HAMPSHIRE 03055**

GRADE ONE PARENT QUESTIONNAIRE

Child's Name: _____

Has your child attended Kindergarten? Yes _____ No _____

Name of Kindergarten: _____

How did he/she adjust to Kindergarten? _____

Does your child have separation anxiety issues? _____

Have you had concerns about any of the following?

- | | |
|---------------------------------|------------------------------|
| _____ Speech | _____ Fine Motor Skills |
| _____ Hearing | _____ Gross Motor Skills |
| _____ Behavior/Emotional Issues | _____ Interaction with Peers |

Is there any family history of school or learning difficulties? If so, please explain.

Has your child had a history of ear infections or had tubes placed in one or both ears?

Was your child premature? Yes _____ No _____

Were there any complications at delivery or in infancy that would be helpful for the school to know? If so, please explain. _____

Did your child have any serious illness/injury? Yes _____ No _____

Allergies? Yes _____ No _____

Has your family had any problems or concerns (i.e. divorce, separation, loss of parent or other close family member, frequent moves, etc.) that we should know about?

What would you like us to know about your child?
