



Hutch Kids Child Care Center

Transition Form For Families

Date:		
Child's Name:	Parent's Name:	Parent's Name:
How long does your child usually nap? (Is there a difference between home & school?)		
Does your child show any interest in toilet training? (If infant or already toileting please write N/A:	If interested/in process of toilet training, what stage are they at?	
Many children have fears of some sort. Are there any specific fears that you feel we should be aware of?		
What languages are spoken at home?		
Are there any specific food dislikes we should be aware of?		
Does your child play well alone?		
Does your child have any special interests?		
Does your child ask for a lot of attention?	What does she/he do to get it?	
What are your child's greatest strengths?		
What areas does your child need support for growth in?		
Are there any specific areas in which you would like us to focus extra attention in helping your child's development?		
Are there any special traditions, holidays, etc., that your family celebrates?		
Who are the important people in your family? (close immediate family/friends, pets, etc.)		
Do you have any special talents or hobbies that you would be interested in sharing with Hutch Kids?		
Is there any special situation of which we should be aware? (i.e., births, deaths, recent separation, new home, etc.)		
Parent Signature:		