

# English Rose Day School- Activity Authorization

## Activity Release Authorization

I hereby give permission for my child \_\_\_\_\_ (Child's Name), to use all of the play equipment and participate in all of the activities as designed and implemented by English Rose Day School.

Signed by Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

## Picture Release Authorization

I hereby give permission for my child \_\_\_\_\_ (Child's Name), to be photographed whilst involved in activities connected with the program at English Rose Day School.

Signed by Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Permission to post pictures on school face book page (no child names) \_\_\_\_ parent initials

Permission to post pictures on school web site page (no child names) \_\_\_\_ parent initials

Permission to post pictures in local newspaper (no child names) \_\_\_\_ parent initials

## Parental Involvement

If you have any special talents, skills or interesting ideas which you would be willing to share with the children, please indicate them below, so that we may contact you.

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Thank you for your help and cooperation in making our school a special one for your children!

**OPTIONAL:** Every year, the National Center for Education Statistics of the US Department of Education requests information about our students. Please fill in the following information.

Child's Ethnicity:

\_\_\_\_\_ Hispanic, regardless of race

\_\_\_\_\_ Black, not Hispanic origin

\_\_\_\_\_ American Indian or Alaska Native

\_\_\_\_\_ White, not of Hispanic origin

\_\_\_\_\_ Asian or Pacific Islander

## English Rose Day School – Child Questionnaire

Please take a few minutes to answer the questions below. This will help us get to know your child better.

Child's Name: \_\_\_\_\_ ( formal name and the name as you want him/her to be called at school if different)

Date of Enrollment at English Rose \_\_\_\_\_ Child's DOB \_\_\_\_\_

1. Please list the names and ages of your child's brothers and sisters, as well as all other household members.
2. What holidays/cultural experiences does your family celebrate at home throughout the year?
3. Has your child previously attended pre-school or day care? - If so where and for how long
4. Does your child have any health issues or allergies that we need to be aware of?
5. What is the primary language spoken in the home?
6. What is the primary language your child speaks?
7. Does your child have any difficulties with speech?
8. Has your child been evaluated for early intervention services or special Education Pre-K services? If so, when and through which agency. Is or was your child eligible for services of any kind?
9. Does your child receive any services such as speech, PT or OT or behavioral? If so which agency are you receiving services from and how often. Where are these services conducted?
10. Is your child afraid of anything?
11. What responsibilities if any does your child have at home?
12. What forms of discipline do you use at home?

**13. Does your child have any strong likes or dislikes ?**

**14. What expectations do you have for this year? What specific things would you like to see happen this year?**

**15. If your child is reading, how did he/she learn and how long has he/she been reading?**

**16. Does your child have anything he/she is really interested in that we might be able to incorporate into our program (i.e. dinosaurs?)**

**17. Is there anything special you would like us to know about your child? – strengths and weaknesses.**

**18. Do you have any concerns or challenges with your child that you would like to share with us?**

**Please use the remainder of this form to provide us with any other information that you would like to share with us in order for us to know your child better prior to the start of school.**