



School Age/Kindergarten Child Information

NAME OF CHILD: _____

WHAT SCHOOL DOES YOUR CHILD ATTEND? _____

GRADE: _____

SCHOOL ADDRESS: _____ PHONE NUMBER: _____

WHAT ARE THE SCHOOL HOURS? _____

HOW DOES YOUR CHILD GET TO SCHOOL?

WALK _____ DRIVEN _____ BUS _____

OTHER _____

BUS DROP OFF _____ BUS PICK UP _____

LOCATION OF BUS STOP: _____

If your child is escorted to school, please describe briefly the circumstances. (I.e., who is the designated person, how will they be escorting your child, etc.)

Is your child permitted to participate in after-school activities that may affect the time your child is in care (i.e., intramurals, Brownies, Scouts, and Clubs?) If so, when, how often, and who will be responsible for dropping off and picking up your child?

If your child does not arrive back from school (i.e., on the bus) your dayhome educator will contact you immediately and parents are responsible for contacting the school.

Parent Signature: _____ Date: _____

Educator Signature: _____ Date: _____

The personal information contained on this document is required under our contract with Child and Family Services and is collected under the Freedom of Information and Privacy Act. It will be used to maintain our database and in the case of emergency.