



Buffalo State Child Care Center
Buckham Hall C-Wing
1300 Elmwood Avenue
Buffalo, NY 14222
Phone: (716) 878-5335
Fax: (716) 878-3660

Family Questionnaire

Child's Name: _____ Date of birth: _____

Mother's/Guardian's Information

Mother's/Guardian's Name: _____ Campus Affiliation: _____

Home Address: _____

Home Phone: _____ Cell: _____

Employed at: _____

Name of Employer

Phone Number

Job Title

Work Schedule

Father's/Guardian's Information

Father's/Guardian's Name: _____ Campus Affiliation: _____

Home Address: _____

Home Phone: _____ Cell: _____

Employed at: _____

Name of Employer

Phone Number

Job Title

Work Schedule

Child's parents are: Single Engaged Married Separated Divorced Other

If parents do not live together, is there joint custody? _____ Yes _____ No

If no, who is the custodial parent? _____ Are there any restrictions on parental pick-up? _____

If there are parental pick-up restrictions, you **must provide legal documentation**. Any changes must be submitted to the Director in a timely manner. _____ Please Initial

A copy of your **insurance card is required** in case of emergency. Copy Provided? _____ Yes _____ No

Please rate your child's overall health: Very Poor Poor Average Good Very Good

Are there any allergies or medical conditions we need to be aware of? _____

Does your child take naps? ____ Yes ____ No Does your child have a regular bedtime? ____ Yes ____ No

Briefly tell us about other family members: _____

What languages are spoken at home? _____

Briefly tell us about any family traditions/customs you may have: _____

Please describe what you like to do as a family: _____

Is this your child's first time in a child care group setting? ____ Yes ____ No

My child plays well: Alone With 2-3 Others With a Group All of the Above

What sparks your child's interest at this time? _____

My child handles separation from parent: Well Takes time Not Well

What guidance techniques do you use at home? Please give an example: _____

Does your child enjoy the outdoors? ____ Yes ____ No

Discuss something that you feel your child is very capable of doing at this stage/age: _____

Please provide any additional information you would like to share about your child or their development: _____

