



Prep Parent Questionnaire

Thank you for enrolling your child at Moorooka State School. We take the responsibility of education your child very seriously.

As Early Years educators, we would like to provide you as parents with every possible opportunity to pass on information to our school that will support us make informed decisions when placing your child in a class, welcoming them to our school and supporting them to settle in.

To help us best support your child, please take the time to complete the following questionnaire, which will be used to decide class placements and initial support strategies. If you have any further information that you would like to provide our school please attach it to this questionnaire. We also ask that you also provide us with your child's Transition Statement when you receive it from your Kindergarten provider.

Please complete and return before your enrolment prep parent interview.

Thank you.

We welcome you to our school community. This information is held in confidence. Please give as much detail as you can on your child's current abilities.

Child's full name: _____ Preferred name: _____

Child's age entering Prep: _____ Date of Birth: _____

Parent/Carer name/s: _____

Student lives with: mother step-mother grandparent(s) other: _____

(Check all that apply) father step-father foster parents

Is there are a shared parenting arrangement in place? Yes No

Number of children living in student's home: _____ Your child is the **youngest** **middle** **eldest** (circle)

Other siblings attending Moorooka State School:

Name: _____ Age: _____ Year: _____

Name: _____ Age: _____ Year: _____

What motivates your child?

Five words that describe your child and their personality are...

- 1.
- 2.
- 3.
- 4.
- 5.

What kind of things upset your child?

What are three goals for your child in their Prep year?

- 1.
- 2.
- 3.

The following questions will provide our staff with essential information to cater for your child's needs as they begin their educational journey at Moorooka State School.

Does your child display curiosity about the world? Give an example:	Comments:		
In your opinion, does your child display any special skills or talents? (language, literacy, drama, storytelling, music, dance, art, athletics, problem solving, other)	Comment:		
Who will be dropping off and collecting your child from Prep?	Comment:		
Will your child be attending before or after school care? What days?	Comment:		
Is your child looking forward to starting Prep?	Comment:		
Social and Emotional Development			
Does your child follow rules and instructions without reminders?	Not yet	Sometimes	Always
Does your child adjust easily to changes in routines?	Not yet	Sometimes	Always
Does your child demonstrate self-control?	Not yet	Sometimes	Always
Does your child ever act aggressively? E.g: hitting, biting, yelling, temper tantrums Comment:	Not yet	Sometimes	Always
Does your child take care of his/her belongings?	Not yet	Sometimes	Always
Does your child tidy up when asked?	Not yet	Sometimes	Always
Can your child usually solve most everyday problems as they arise?	Not yet	Sometimes	Always
Does your child separate easily from caregivers?	Not yet	Sometimes	Always
Does your child share easily with others?	Not yet	Sometimes	Always
Does your child become fixated on certain belongings?	Yes:		Never

Health information			
Has your child ever seen or been referred to any of the following specialists: (tick which apply) <ul style="list-style-type: none"> <input type="radio"/> Ear, Nose and Throat Specialist <input type="radio"/> Speech Pathologist <input type="radio"/> Occupational therapist <input type="radio"/> Paediatrician <input type="radio"/> Physiotherapist <input type="radio"/> Psychologist <input type="radio"/> Other: _____ <p><i>Please provide details and copies of reports where possible</i></p>	Do you have any concerns about your child's development? (tick which apply) <ul style="list-style-type: none"> <input type="radio"/> Eyesight <input type="radio"/> Speech <input type="radio"/> Hearing <input type="radio"/> Physical Contact 		
Physical Abilities			
Can your child dress/undress themselves e.g.: manipulate buttons, zips, tie shoe laces?	Not yet	Currently working on	Does this effectively
Can your child attend to personal hygiene e.g.: toileting, washing/drying hands?	Not yet	Currently working on	Does this effectively
Can your child use stairs appropriately?	Not yet	Currently working on	Does this effectively
Sleeping Habits			
Does your child have a good sleep routine?	Not yet	Currently working on	Does this effectively
Does your child have an established bedtime?	Not yet	Currently working on	Yes, ____ pm
Does your child tire easily?	Not yet	Sometimes	Always
Language and Communication Skills			
Is your child's speech clearly understood by family members and others?	Not yet	Sometimes	Always
Can your child speak confidently to an adult in familiar and unfamiliar situations?	Not yet	Sometimes	Always
Can your child speak confidently to other children?	Not yet	Sometimes	Always
Can your child enter and exit a conversation using appropriate manners?	Not yet	Sometimes	Always
Computer/ICT Skills			
Does your child have access to a computer/ICT device at home?	Not yet	Sometimes	Always
Can your child use a computer/ICT device independently?	Not yet	Sometimes	Always
Approximately how much time does your child spend on computers/ICT devices or watching TV each day?	1-2 hours	2-3 hours	More than 3 hours

Early Literacy Skills			
How often do you read to or with your child? (Circle)	Daily	Weekly	Never
Does your child enjoy listening to stories?	Not yet	Sometimes	Always
Does your child remain attentive for the duration of a picture book reading?	Not yet	Sometimes	Always
Does your child interact during the reading? i.e.: ask questions or make comments	Not yet	Sometimes	Always
Does your child recognise his/her own name?	Not yet	Sometimes	Always
Physical and Emotional Health			
Does your child suffer from any allergies? e.g.: nuts, bees, egg, chlorine, other	Comment:		
How would you rate the severity of this allergy?			
Does your child have an action plan signed by a doctor? (If so, please provide this plan to the school as a matter of urgency)			
Does your child have any medical conditions e.g. asthma, diabetes.	Comment:		
Has your child recently experienced any major life event? e.g. family trauma/moved house/loss of family member/new baby etc.	Comment:		

Prior to Prep experiences		
Please tell us about your child's pre-school experiences: (Child Care, C&K centre, Family Day Care, Family carers etc.)		
<i>Name of centre</i>	<i>Hours per week</i>	<i>Years attended</i>
Please feel free to list some current friends of your child's, and make note if you believe they would be good learning buddies for your child.		

Other information

Please tell us any other important information that you feel we should know about your child...

Thank you for taking the time to complete this questionnaire.

This questionnaire plays a major part in assisting us to transition your child successfully to Prep at Moorooka State School. Please ensure you complete and submit this questionnaire, along with your completed enrolment forms, to the school office before the Orientation program begins.

All information provided will be treated with care and considered in confidence.

A quick check list: What I need to enrol at Moorooka State School

- Completed Enrolment Forms, including:
 - Enrolment Agreement
 - Permission/Agreement Forms
 - Prep Parent Questionnaire
 - Transition Statement
 - Proof of Address (Utilities or lease agreement)
 - Immunization Records
- Child's birth certificate (original or certified copy)
- Court orders if applicable
- Passport and/or EQI paperwork is on visa and not a permanent resident

Submitted to the school office