

# *Family Needs Questionnaire*

## *My Child's Needs*

1. What stage of development is our child? Birth to 3, 3 to 6, 6 to 12, 12 to 18?
2. Is our child naturally outgoing or more reserved?
3. Does our child have allergies to medications, foods, or other substances?
4. Has our child's hearing and vision been tested for difficulties?
5. Is our child a picky eater? Which foods does he or she avoid?
6. Does our child eat a well-rounded diet?
7. Does our child get 10 to 12 hours of sleep per day?
8. Have there been any changes in routine in the past month or two? For example move to a new house, birth of a sibling, parent traveling, long term visitors in the home, death in the family, job loss, job change, parent separation or divorce, arguments in the family.
9. How many hours per week does our child watch television or movies?
10. How many hours per week does our child play video or computer games?
11. Does our child have or had a long-term illness? For example, chronic ear infections or asthma.
12. How many hours per week does our child ride in a car?
13. How many people per week does our child interact with?
14. Do we feel that our child has adequate challenges for personal growth?
15. Is our child in an environment that protects him or her from physical and emotional/psychological harm?
16. Does our child have daily opportunities to work, learn and play peacefully in a child-based environment?

## *Parents' and Family Needs*

1. Are we emotionally ready to let our three-year-old go to school?
2. Are we in a position to support our child emotionally in a new situation?
3. Have there been any significant changes in our lives in the past two months, such as re-location or a new job that could affect the emotional center of our child?
4. Is our family physically ready for school? Is our child on a sleeping and eating schedule that works with the school schedule?
5. Is our child recovering from an illness or on medication that could make him or her drowsy, cranky or hyperactive? Some allergy medications and antibiotics affect alertness and energy levels.
6. Are all members of the family, siblings and parents, and extended family, positive and excited about this first step into a larger world for our child?

7. Do we need before and/or after school care for our child?
8. Do we have a back up plan for our jobs when our child is ill or school is closed due to inclement weather or school breaks?
9. How many hours per week do we need to drive our child to school? Does this impact our family life adversely?
10. Is our family budget strained by paying for private school?
11. Do both parents feel that school tuition is a wise investment for our family?
12. Is there enough time and money in the family budget for us as parents to pursue some of our interests?
13. What indicators do we need to feel confident that our child is making satisfactory progress in his or her development?

### *Other Family Member Needs*

14. How will our child attending preschool affect other family members? Siblings? Grandparents? Others?
15. Are other family members supportive of our child going to preschool?
16. Will the time needed to transport our child to school adversely affect other family members?