



Enrollment Questionnaire

Thank you for choosing Plainville Early Learning Center for your child's first educational experience. Our mission is to provide quality care and education for your child. By answering these questions, we will be taking the first step in ensuring he/she has a successful learning experience at PELC.

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Child's Name: _____ Nickname: _____

1. What would you most like us to know about your child?

2. What are your child's favorite:
 - Color:
 - Toys:
 - Food:
 - Activity:
 - Character:
 - Other Favorites:
3. What would you say are your child's greatest strengths?

4. What holidays do you celebrate? Are there any special traditions or customs your family observes?

5. Who are the significant people in your child's life you would like acknowledged during special holidays or events? (e.g. parents, grandparents, aunts, uncles, close family friends, etc.)

6. Are there any concerns that we should know about?

7. What would you most want your child to learn in our program?

8. Would you like to receive updates about your child, their progress, and center happenings via email?
 Yes _____ No

(Print email address)