



Child Intake Form

Last Name: _____ First Name: _____

DOB: _____ Age: _____

Name of school:

•• Family Information ••

Address: _____

Parent/Guardians: _____

Names and ages of siblings:

Cell Phone Number: _____

Home Number: _____

Emergency Contact Number: _____

Email Address: _____

•• Medical Information ••

Briefly describe your child's disability:

Medical or special concerns:

Please check any that apply and explain if needed:

Uses toilet independently:

Uses toilet with supervision:

Needs transfer assistance:

Follows a specific schedule:

Times: _____

Wears Diapers/ Pull-ups

Changing Instructions:

Signs/Gestures toilet/change needs:

Other:

•• Dietary Information ••

My child CANNOT eat these foods due to allergies or dietary restrictions:

My child enjoys eating these foods/snacks:

My child requires prompts/cues to initiate (please provide examples):

My child expresses basic wants/needs by (check and provide an example)

Eye gaze/contact:

Gestures:

Signs:

Assistive Tech:

Other:

Check any applicable information that might be helpful for volunteers to best minister to your child:

- Difficulty with transitions
- Aggressive behavior
- Difficulty with changes in routine
- Difficulty with fine motor (cutting, pasting, writing)
- Needs visual presentations
- Difficulty sitting in a group
- Issues with separation anxiety
- Tends to run (leaves classroom with out permission; wanders)

Other:

Helpful special suggestions about your child (“redirect my child by...”)

What other behaviors should we be aware of?

If your child is having a difficult time, at what point do you want to be notified?

I acknowledge that this information will be shared with selected volunteers and appropriate staff members for the sole purpose of providing the adequate level of ministry to my child.

I, _____, fully understand that if I am unable to administer medication in the event of an emergency, the EMT or other medical personnel called will do so as necessary.

Signature:

Date:

If you have any questions or concerns, please email us at SpecialDiscoveries@ChristJourney.org

