



Oak Brook School

family owned since 2001

Let Me Tell You About My Child!

Child's Name: _____ Date of Birth: _____ Age: _____

My child likes to be called: _____

Moms name is: _____

Dads name is: _____

I live at home with my: (check all that apply) Mom Dad Step-Mom
Step-Dad

Grandma Grandpa Other: _____

Potty Training: (check all that apply) I wear diapers I wear pull-ups

I wear big-kid underwear I always need a reminder I sometimes need a reminder

Eating Habits: I eat everything all of the time I sometimes eat
 I am a picky eater

I have _____ siblings!

Their name is: _____ (circle one) Sister/Brother Age: _____

Their name is: _____ (circle one) Sister/Brother Age: _____

Their name is: _____ (circle one) Sister/Brother Age: _____

A few of my favorite things...

My favorite color is: _____

My favorite song is: _____

My favorite food is: _____

My favorite toy is: _____

My favorite book to read is: _____

Office Use Only:

Classroom: _____ Start Date: _____



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