



DEVELOPMENTAL HISTORY

F. Introducing My Child: A Developmental History (Grades N-5 only)

Child's full name _____ School Year _____

At birth, was your child full term? _____ Was there unusual trauma at birth? _____

Did you as a mother have any emotional difficulties during pregnancy? If yes, explain:

Did you suffer post-partum depression? _____ Did your child require assistance breathing? _____

Did your child spend time in a specialized care unit? _____

At how many months did your child begin saying words? _____

Did your child crawl before walking? _____

At how many months did your child take her/his first steps? _____

Has your child had any significant hospital stays or long term medical treatment? _____ If yes, explain:

Does the teacher of your child need to know about any special considerations or adjustments that may need to be made to the daily routine or physical space? _____ If yes, please describe:

Has your child has his/her vision/hearing tested? _____

Do you restrict your child's diet in any way?

Are any languages other than English spoken at home? _____ If yes, please explain:



At present time, do you, your pediatrician or your child's school have any particular concerns about your child's development (i.e. speech, motor development, learning, etc)

Has your child been diagnosed as L.D. or High Achiever/Gifted? ___ Yes ___ No *If yes, please attach information*

Has your child ever had testing for a learning disability? _____ If yes, please attach a copy of the results.

Does your child have any diagnosed disabilities?

How do you describe your parenting style?

Are there any significant family issues that we should be aware of? (i.e. divorce, death of a parent, remarriage, etc) _____ If yes, please explain

If parents are separated / divorced, who has de custody of the child? _____

How much time the child spends with each parent? _____, which days?

How often is your child cared for by a person other than a parent? _____

Please circle the characteristics that describe your child:

Responds to instructions given in a small group	Always	Usually	Not Yet
Initiates tasks without being reminded	Always	Usually	Not Yet
Follows directions with little or no resistance	Always	Usually	Not Yet



Cooperates in group activities	Always	Usually	Not Yet
Trusts familiar adults and follows instructions given	Always	Usually	Not Yet
Waits his/her turn for a teacher's attention	Always	Usually	Not Yet
Delays gratification until a task is completed	Always	Usually	Not Yet
Recognizes and considers the feelings of others	Always	Usually	Not Yet
Transitions easily from one activity to another	Always	Usually	Not Yet

Please circle the characteristics that describe your child:

- | | | | | | |
|-------------|-----------|--------------------|--------------|-----------|-------------------|
| Happy | Active | Quiet | Moody | Withdrawn | Dependant |
| Independent | Attentive | Inattentive | Good-Natured | Calm | Easily Aggravated |
| Clumsy | Friendly | In control of body | Impulsive | Stubborn | Even-tempered |
| Aggressive | Fearful | Responsible | Other: _____ | | |

Does your child enjoy reading books? _____ Listening to stories? _____

Is it difficult for your child to adjust to new environments? _____

Do you limit your child's TV viewing in any way? _____ How many hours of TV per week? _____

Do you limit your child's computer/video game use in any way? _____ How many hours per week? _____

What are your child's favorite activities:

Indoors? _____ Outdoors? _____

Does your child play well alone? _____

Does your child usually play:

___ Alone? ___ With younger children? ___ With older children? ___ Children his/her own

age?

___ Siblings? ___ Others: _____



By an occasional babysitter? _____ By a regular child-care provider? _____

Others: _____

Is your child currently attending or has your child attended preschool or kindergarten programs or classes? _____

Please list other members of the household such as siblings, extended family members, employees:

Are any siblings also in school? Please list names and grades.

Where else has your child lived and at what ages?

Is your child particularly attached to any specific place or person?

How long have you been in Ecuador? _____

Additional comments for teacher / counselor _____

Please circle the answers that best describe your child's current behavior:

Plays independently in company of peers	Always	Usually	Not Yet
Is aware of differences between males and females	Always	Usually	Not Yet
Responds when someone greets him/her	Always	Usually	Not Yet
Describes his/her feelings	Always	Usually	Not Yet
Chooses his/her own friends	Always	Usually	Not Yet



Discriminates between socially acceptable and unacceptable behavior	Always	Usually	Not Yet
Serves as leader in peer relationships	Always	Usually	Not Yet
Asks for an adult's help when needed	Always	Usually	Not Yet
Uses an adult to help in handling peer conflicts	Always	Usually	Not Yet
Accepts responsibility for errors or wrongdoings	Always	Usually	Not Yet