



INTERNATIONAL SCHOOL OF THE SACRED HEART

4-3-1 Hiroo, Shibuya-ku, Tokyo 150-0012 Japan

Telephone: +81-3--3400-3951 Fax: +81-3--3400-3496

E-mail: info@issh.ac.jp

Web: <http://www.issh.ac.jp>

Parent Survey - Kindergarten

Child's Name: _____ Birth Date: _____ / _____ / _____
Day Month Year

LANGUAGE AND HEARING DEVELOPMENT

1. What language is spoken most frequently at home? _____
2. At what age did your child say his/her first word? _____
3. Do you have any concerns about your child's speech? Yes / No
If yes, please explain _____
4. Does your child speak in sentences 4 – 5 words in length? Yes / No
5. Do you have any concerns about your child's hearing? Yes / No
* Have frequent ear problems? Yes / No
6. Has your child ever had tubes in his/her ears? Yes / No

VISUAL DEVELOPMENT

- Does your child: * Have difficulty seeing things far away or close up? Yes / No
* Wear glasses? Yes / No

If yes, Name of "Eye" Doctor: _____ Date of last exam: _____

SOCIAL DEVELOPMENT

1. Does your child need help with dressing or dress with your help? Specify: _____
2. Does your child have other opportunities to play with young children? Yes / No
3. Do you have any concerns about your child's sleeping patterns? Yes / No
4. Is your child toilet trained during the day? Yes / No

If your child has any physical, emotional or cognitive challenges, these must be shared and discussed with the Head of School at the time of application.