

1. Briefly describe your child's experience(s) learning and/or playing with a group of peers, if any (e.g. Are they in school? Have they attended homeschool co-op, extracurricular classes, playgroups? Will this be their first experience with group learning?)
2. What about your child makes you proud?
3. What are your child's gifts and strengths?
4. If your child has a disability, chronic condition, or other diagnosis that can affect their participation in our group, please share a little bit about your child's story and needs (you'll be able to add more detail to specific questions below)
5. Does your child have any specific passions, strong interests, or activities that excite them or bring them joy?
6. What activities and people does your child enjoy?
7. What are your child's favorite ways to play?
8. How would you describe the style your child tends to learn best? (e.g. listening, reading, seeing pictures, hands-on, with movement, etc...)
9. In what way(s) does your child most comfortably communicate? (e.g. speech, AAC, ASL, etc....)
10. What are your primary goals for your child this semester? And/or how do you hope this group will benefit your child?
11. Does your child have any sensory preferences or aversions? If yes, please describe, and tell me what can help
12. Is there anything notable about your child's relationship to music? (e.g. Does your child really benefit from and/or enjoy background music? Dance breaks? Or, is your child sensitive to or easily overstimulated by music?)
13. Does your child have any physical differences that would be helpful for me to understand?
14. Does your child use any mobility aids?
15. Describe areas of life your child finds particularly difficult, if any.
16. What tends to cause your child to feel frustrated or overwhelmed?

17. What does it look like for your child when they feel frustrated, overstimulated, or overwhelmed?
18. What coping tools and skills does your child benefit most from having available?
19. What classroom accommodations most benefit your child in a traditional classroom, if any?
20. If your child struggles with transitions, what usually helps make transitions more tolerable for them?
21. Does your child have any food or other allergies?
22. Does your child have dietary restrictions? If so, what foods should be avoided?
23. What are your child's favorite/"safe" foods? ("safe" foods are those that a child with a limited diet reliably feels comfortable consuming)
24. Is there anything else about your child we should know, or any other info not yet mentioned that will help us make them feel welcome and supported?
25. Will this child be attending with a parent, attendant, therapist, or other adult caregiver?  
(yes / no / I'd like to discuss)