Parent Goals and Expectations

Child's Name_______________________________       Age_____________
Child's Preschool Room__________________________________________

What would you like your child to learn or experience while at Creative Childhood Center?

What types of parent involvement would interest you?

_____ helping in your child's preschool room during parties and holidays.
_____ be a Mr. or Ms. Fix it
     _____ maintenance
     _____ painting
     _____ sewing/mending
     _____ playground/gardening
     _____ field trips
     _____ fund-raising

Do you have a special interest or hobby that you would be willing to share with Creative Childhood Center children and staff?

Parent's Name___________________________________   Date___________________