

CLIENT QUESTIONNAIRE

- What are your specific needs for a caregiver?

- Would you like our staff to perform school drop off or pick up? _____
- What is the school your child/children attend _____
- Would you like our staff to drive your child/children to sporting events, after-school sporting events, or appointments? _____
- How many children will be watched at one time _____
- Would you like the staff in your home to do light housekeeping _____
- If you answered yes, what type of house cleaning would you be interested in

- What are the ages of your children/child _____
- Does your child have any special needs _____
- Are there any medical conditions/dietary needs or allergies we need to be aware of

- If so is there Medication that needs to be administered while in our care? _____
- Is your child/children taking any other medications, that we may have to administer while under our care _____
- Are there any restrictions in your home in which we need to be aware of

- Would you like our staff to cook meals for your children _____
- Would you like our staff assistants to help your child/children with homework, is there a specific area of study you wish us to focus on _____
- Are there any dietary concerns in which we must need to know about

- If your child is home sick from school as long as the child is non-contagious, would you be interested in utilizing the service at that time wherein the staff would pick your child up from school and if needed take your child to their physician for exam & then stay with your child until you arrive _____
- Would you have a need in the future for someone who would pet sit, house sit, plant sit or if you eventually comfortable with your helper, someone who would stay with your child/children for overnight, weekend or short business trips?

- If you are a working parent and you get a call from school/daycare that you child needs to be picked up and you cannot leave your job, we will be happy to pick up your child and take your child home and stay until the parent arrives, would you be interested in this service? _____
- In what other ways may we be of help to you either now or in the future?

- Would you like for our caregivers to assist your child/children with school work, and/or tutoring? _____.
- Listed below are holidays in which parents may or may not work or may just need assistance for school-closure, on the list provided please indicate which, if any, holidays you might be interested in utilizing our services either for baby sitting or pet sitting:
 1. Thanksgiving _____
 2. Christmas Break _____
 3. New Year's Eve _____
 4. Teacher Planning Days _____
 5. Veterans Day _____
 6. Dr. Martin Luther King Day _____
 7. Spring Break _____
 8. Early Release Days _____
 9. Memorial Day _____
 10. Summer Break _____
 11. End of Summer before school returns (Aug 1-15th) _____
 12. Summer _____

Please provide us with the following information:

Your Full Name: _____

Spouse's Name: _____

1st Child's Name: _____

2nd Child's Name: _____

3rd Child's Name: _____

Nearest Relative: _____

Pet's Name/s _____

Email Address _____

Home Address _____

Dr. Information _____

Emergency Contacts: _____

Closest Intersection: _____

Please provide all phone numbers for contact in case of emergency
