



"Because we honor families, we weave a fine fabric of security and acceptance for the children in our care."

FAMILY BACKGROUND QUESTIONNAIRE

Date _____

Family Name: _____ Child's Full Name: _____

Child's Nickname: _____ Date of Birth: ___/___/___

Parent/Guardian's Name: _____ Occupation: _____

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Family:

Who do you authorize to pick up your child from Rockport?

Who are the significant other people in your child's life?

Members of your household: (please list number of each)

Brothers: _____ Sisters: _____ Grandparents: _____ Others: _____

Status:

Married Divorced Co-Parents Engaged Living Together Partners Single

If divorced, can both parents pick up? _____ Is there a visitation schedule? _____

What is the schedule? _____

Who has custody? _____

If your child becomes ill or there is an emergency, who should be contacted?

Additional Comments:
