

Questionnaire for Parents/Guardians of Children with Special Needs

In order for us to plan accordingly for "Second Sabbath: A Special Time of Grace" Services, please fill in the questionnaire below and return to:

Second Sabbath

Wolcott Congregational Church, 185 Center Street, Wolcott, CT 06716

Child's Name _____ Age _____

Parent/Guardian Name(s) _____

Address _____

Phone # Home _____ Cell _____

List any special needs your child has:

Please list the names and ages of family members/others who will be regularly attending the service with your child:

Please check any applicable information that might be helpful for us to plan and minister to your child.

Short attention span/easily distracted

Allergies If checked please list:

EPI PEN required and available?

Temper tantrums or easily upset by _____

Challenges with transitions (changing from one activity to another)

Aggressive behavior

Challenges with changes in routine

Shyness

Challenges with following directions

Challenges with fine motor skills (cutting, pasting)

Special bathroom needs – please explain

Adaptive Equipment needs – please explain

Difficulty completing activities

Any questions or concerns please contact: The Rev Sue Strachan 203-879-4002

1/2013