



NAVY CHILD AND YOUTH PROGRAM BIRTH TO FIVE CHILD AND FAMILY PROFILE

The Navy Child and Youth Program (CYP) Birth to Five Child and Family Profile is designed to help our CYP Professionals get to know your child and family, so that they are best prepared to provide a fulfilling and meaningful experience and to ensure your child’s needs are met. Please complete the sections below as fully as possible.

PARENT/GUARDIAN INFORMATION			
NAME OF SPONSOR/PARENT:		DATE COMPLETED	
NAME OF SPOUSE (IF APPLICABLE)		PERSON COMPLETING FORM	

CHILD INFORMATION		
NAME (LAST, FIRST, MI):	NICKNAME:	AGE:
CHILD’S PRIMARY LANGUAGE:	OTHER LANGUAGES SPOKEN IN THE HOME:	

FAMILY INFORMATION			
SIBLINGS	AGE	EXTENDED RELATIVES/OTHERS (living with the child)	RELATIONSHIP

TELL US ABOUT YOUR CHILD
Please describe your child’s communication skills (e.g., how does your child tell you what he/she wants, special words used to describe needs, etc.).
Please describe your child’s motor skills (e.g., how does your child get from one place to another; crawling, scooting, roll, walk, run, is there a skill that your child is working on, etc.).
Please describe your child’s self-help skills (e.g., what can s/he do by her/himself, help with dressing, washing, eating, putting on shoes, putting toys away, etc.).



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TELL US ABOUT YOUR CHILD

Please describe your child's emotional behavior (e.g., does your child have any fears, how does your child react to changes in routine, how does your child express frustration or anger, what is comforting to your child, etc.).

Please describe your child's experience with other children (e.g., is this your child's first group experience, do children come to visit, are there friends in the neighborhood, etc.).

What does your child like to do during the day (e.g. favorite activities, songs, toys, etc.).

Many families wonder about how their child is growing or learning compared to other children the same age. Is there anything that you wonder about how your child is growing or learning?

Is there anything else you would like us to know about your child?

DAILY ROUTINES

DIAPERING/TOILETING

Please describe your child's toileting needs (e.g., toilet training, reminders needed, special words, etc.).

Is there anything special we should know about dressing and undressing your child?



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Does your child have any birthmarks or other identifiable markings the staff should be aware of? If so, where are they located?

SLEEPING AND RESTING (Navy CYP requires all infants 12 months and younger be placed on their backs to sleep)

What signs does your child exhibit when he/she is tired and needs to sleep?

Please describe your child's daily napping/sleeping routine (e.g., usual nap times, what helps child to fall asleep, etc.).

Describe how your child wakes up: (e.g., quickly, slowly, happy, etc.).

MEALTIME AND INFANT FEEDING

Please describe your child's eating (e.g., mealtimes, food likes/dislikes, dietary preferences or restrictions, allergies, etc.).

Is your infant breastfed? Select Yes (Y) or No (N)

Y

N

If yes, will mom come to the center/home to nurse? Select Yes (Y) or No (N)

Y

N

If no, will you send expressed breast milk?

Y

N

If your infant is not breastfeeding, what formula do you use?

Is your infant eating solid foods? Select Yes (Y) or No (N)

Y

N

If yes, please list which ones, including any finger food:



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TELL US ABOUT YOUR FAMILY

Please describe some of your favorite activities to do as a family.

Please describe special events your family celebrates and what those celebrations might include.

Are there things from home that are special to the family that you would be willing to share? (e.g., family recipes, traditions, etc.).

Are there any special skills and talents that members of your family might contribute to the program?

Is there anything else that you would like us to know about your family?



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FAMILY ENGAGEMENT OPPORTUNITIES

Child & Youth Programs strives to strengthen the practice of engagement through continuous program improvement. As a component of that philosophy, Navy CYP believes family relations are an essential component of quality child care, the CYP and the military community. Our programs promote engagement by inviting family members to share interests, talents, abilities, knowledge, and skills as inclined. There are a myriad of opportunities available for parent participation throughout the year from participating on the Parent Involvement Board (PIB) to assisting on field trips or during a CYP event.

Please check the activities that you might be interested in participating in. Or, add other skills and talents that you would like to contribute to our CYP program!

- PIB Chairperson
- Program PIB Representative
- Field Trip Volunteer
- Participating in Activities
- Attending a CYP sponsored parent education event
- Making educational materials
- Reading books to children
- Assisting with meal time and having conversations with the children
- Assisting with projects such as art projects or carpentry/building projects
- Creating bulletin board displays
- Facilitating or assisting with special activities like planting and maintaining a garden
- Volunteering as a Youth Sports and Fitness Coach

Other:

- _____
- _____

Parent Signature

Date