

ESCUELA CARACOL

San Marcos La Laguna • Sololá • Guatemala • www.EscuelaCaracol.org • info@escuelacaracol.org • 5883-1609

GENERAL FAMILY INFORMATION

INFO ABOUT THE CHILD:

Complete Name: _____

Male or Female: _____

Age: _____

Birth date (day/month/year): _____

Place of Birth: _____

Languages (maternal first): _____

Passport #: _____

Medical Conditions: _____

Allergies or Diet Restrictions: _____

INFO ABOUT THE FAMILY:

Mother's Name: _____

Mother's Work: _____

Mother's Cédula/Passport (number & country): _____

Father's Name: _____

Father's Work: _____

Father's Cédula/Passport (number & country): _____

How many children in the family: _____

Address: _____

Telephone numbers: _____

Email(s): _____

CONTACTS IN CASE OF EMERGENCY:

1. Name: _____
Telephone: _____
Address: _____
Relation: _____

2. Name: _____
Telephone: _____
Address: _____
Relation: _____

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INSCRIPTION FORM

Inscription for: ___ *KinderCaracol* (preprimaria) ___ Primary Classes

Name of Child: _____

Age: _____

Birth date (day/month/year): _____

Names of siblings in *Escuela Caracol*, if any: _____

1. Describe briefly why you want your child to be a part of *Escuela Caracol*:

2. Why do you feel that your child and *Escuela Caracol* are a good combination?

3. Narrate briefly the biography of your child, including important events in his/her development. For example, if you have moved between houses, family status (separation, divorce, etc.).

4. Describe a normal weekday in the life of your child. When does s/he wake up, go to sleep, favorite foods, rituals s/he has, what s/he likes and dislikes, extracurricular activities? Does s/he watch television or use the computer, video games, etc.? How much time is spent in these activities?

5. Tell us how your family spends a weekend. What activities do you like to do? How does the typical weekday routine vary (activities or entertainment)?
