We are glad to be open and welcoming you and your child back to our program! As we return, our teachers want to make the transition as smooth as possible. The pandemic has impacted every family in different ways. We want to make sure we are responsive to your child's needs and help you and your child feel supported. To the extent that you feel comfortable, we ask if you would please share any information that would be beneficial for your child's teacher to know. We have provided a few questions below that will help us get a better idea of how things are going and how to support your child. Please feel free to answer only those questions you feel comfortable with.

1. Have there been any changes to your child’s environment at home that might impact their transition back to school that you want us to know about? (check all that apply):
   - □ Moved to new location
   - □ Family member(s) now working from home
   - □ Change in schedule or routines (e.g., working hours of family member changed so child had to be up earlier)
   - □ Family impacted by illness/death
   - □ Change in who is regularly living in the home
   - □ Change in caregiver (e.g., grandparent with your child during the day, sitter was with child while school was closed)
   - □ Other:

2. During the “stay at home” time away from school, my child… (check all that apply):
   - □ missed seeing friends at school.
   - □ enjoyed having more family time.
   - □ had a difficult time with not being able to go places we usually go.
   - □ was okay with changes in our routines.
   - □ was worried about someone who was ill.
   - □ seemed sad or withdrawn.
   - □ was more anxious and nervous.
   - □ was frustrated easily or had more meltdowns.
   - □ was clingy and did not want to leave family members.
   - □ had a change in sleeping patterns.
   - □ had a change in eating patterns.
   - □ Other:

3. We want to effectively support your child at school. What strategies work best when your child experiences challenges or difficulties? (check all that apply):
   - □ Engaging in a calming activity. Please specify:
   - □ Receiving a hug
   - □ Going for a walk
   - □ Reading a book with an adult
   - □ Giving them time to calm down
   - □ Talking with them about their feelings
   - □ Playing a favorite game or a favorite toy. Please specify:
   - □ Using visual supports (e.g., visual schedule, visual choices)
   - □ Other:

4. How can we help you support your child at home? Do you need resources or support to help your child at home with any of the following? (check all that apply):
   - □ Morning routine
   - □ Grooming routine
   - □ Meal-times
   - □ Riding in the car
   - □ Naptime
   - □ Bedtime
   - □ Following directions
   - □ Playing alone
   - □ Playing with others
   - □ Handling frustration or anger
   - □ When a visitor comes to the house
   - □ Transitioning to school
   - □ Transitioning out of school
   - □ Trips within the community
   - □ Other:

5. We want to be in touch with you and make sure you can share information with us. What is the best way for us to have communication with each other? (select all that work best for you):
   - □ Email (best email)
   - □ Phone calls (best number)
   - □ Texts (best number)
   - □ Notes from home to school/school to home
   - □ School App

6. If needed, please feel free to share any other information that would be helpful for your child’s teacher to know about your child’s time at home: