

The Montessori School of Champaign-Urbana

BIRTHDAY OBSERVANCE

In the Montessori classes we observe each child's birthday with a special birthday celebration. Part of the celebration is a story about the child's life. Please complete this form with the information requested.

Child's Name _____ Ethnicity/Race _____

Date of Birth _____ Birth Country _____

Place of Birth _____

(Hospital)

(Other)

(City – State – Country)

Parent Name _____ Country of Origin _____ Ethnicity/Race _____

Parent Name _____ Country of Origin _____ Ethnicity/Race _____

Siblings (with ages) _____

Pets _____

Places child has lived _____

Age

Places child has traveled _____

Age

Schools child has attended _____

Age

Additional Information (Heritage, Travels, etc.) _____

Favorite toys and activities as a toddler _____