Au Pair IN AMERICA educare IN AMERICA

Child Care Questionnaire

This questionnaire is a guide to be used by the host family/au pair when discussing the needs of the children to help the au pair assist with child care.

OUR FAMILY

Tell me about each of your children. (How would you describe them? What is special about each one?)

_____

_____

_____

_____

_____

_____

Describe an ordinary day.

_____

_____

_____

_____

What kind of day do you want your child to have?

_____

_____

_____

_____

	NAME OF CHILD(REN)	1.	2.	3.	4.
PREFERENCES	Toy				
	Book				
	Pet or animal				
	Person				
	Food				
	Drink				
	Game				
	Thing to do				

IN CASE OF EMERGENCY

Police _____ Fire _____ Ambulance _____

Doctor _____ Neighbor _____

Host parent(s) _____ Business number(s) _____

Host parent(s) _____ Cell phone number(s) _____

What do you consider an emergency? _____

DRESSING

Does the child dress himself/herself? ☐ Yes ☐ No

Who chooses the clothes to be worn? _____

Does the child like privacy when dressing? ☐ Yes ☐ No

Can the child tie his/her own shoes? ☐ Yes ☐ No

TOILETING

How often should the diaper be checked? _____

Do you use ☐ powder ☐ vaseline after a diaper change?

Where should the child be changed? _____

For the child being trained to use the toilet

How do you know when he/she needs to use the bathroom? _____

Are there any unusual signals? _____

Will the child say he/she needs to use the toilet? ☐ Yes ☐ No

Does he/she get a reward for using the toilet? ☐ Yes ☐ No

If yes, what? _____

_____

If he/she will not use the toilet, should we use a diaper? ☐ Yes ☐ No

What do you say when this happens? _____

Does he/she wear a diaper to bed at night? ☐ Yes ☐ No

Does he/she wear a diaper when leaving the house? ☐ Yes ☐ No

What should be packed in the diaper bag? _____

FOOD

Does the child have any allergies? ☐ Yes ☐ No

How does meal time happen in this house? _____

Where does he/she eat? _____

Is the child given food choices? ☐ Yes ☐ No

Does the child need to eat everything? ☐ Yes ☐ No

What if he/she refuses to eat all the food? What about dessert? _____

What would you like me to do about table manners? _____

SEPARATION

How does he/she handle separation from you? _____

_____

How can I distract him/her? _____

_____

Are there any special toys, books or activities to make it easier? _____

_____

NOTES

ROUTINES

Are there special ways of doing things for each child? _____

_____

_____

Is there a special book, place for naps, blanket, pacifier?_____

At bedtime? _____

At nap time? _____

Around meals? _____

CHILDREN'S HOUSEHOLD CHORES

What do you expect the child to do (make bed, dishes, laundry, lawn, pick up toys)? _____

_____

_____

How insistent are you that these chores be done?_____

What shall I say or do if they resist? _____

How much help should I be giving? _____

TELEPHONES

Is the child allowed to answer the phone? ☐ Yes ☐ No

Call friends after school? ☐ Yes ☐ No

Are there limits on how long he/she can talk? ☐ Yes ☐ No

Which phone(s) may the child use?_____

_____

_____

FRIENDS

Who is allowed to come over?_____

_____

May I invite friends for the children? ☐ Yes ☐ No

Must I check with you first? ☐ Yes ☐ No

May they have more than one friend at a time? ☐ Yes ☐ No

Where do you like them to play?_____

_____

Is there anyone you do not wish to come over? ☐ Yes ☐ No

If yes, who? _____

_____

Can he/she go to a friend's house? ☐ Yes ☐ No

Shall I ask you first? ☐ Yes ☐ No

NOTES

DISCIPLINE

What do you do when your child is having a difficult time?

Are there any special things you do or say?

What if I cannot get him/her to cooperate?

Do you use time outs? ☐ Yes ☐ No

What do you say?

Where does it take place? For how long?

Under what circumstances do you want me to call you at work?

OLDER CHILDREN

When do you like him/her to do homework?

Where?

Can he/she listen to music while doing homework?

What kind of help is needed with homework?

Can he/she play, watch TV, visit a friend before it is done? ☐ Yes ☐ No

What about musical instrument practicing?

How strict are you about enforcing these rules?

What is the schedule for lessons, sports practice/games?

Can the child go anyplace on his/her own (alone—walking, bicycling)? ☐ Yes ☐ No

If yes, when, where, and for how long?

Can he/she make spending decisions by himself/herself (candy, clothes, snack, movies)? ☐ Yes ☐ No

NOTES