



KIDENTIFICATION PROFILE

Influencing Everyday Self-Awareness

Information Accurate as of		
Date:		
PERSONAL INFORMATION		
Child's Full Name:		Add Child's Photo Here
Nickname:		
Address:		
City:		
Zip:		
State:		
Height:	Weight:	
Eye Color:	Hair Color:	
BIRTH INFORMATION		
Birthdate:	Type of Delivery:	
Birth Weight:	Birth Length:	Birth Time:
FAMILY INFORMATION		
Dad's Name:		Add Dad's Photo Here
Phone No:		
Occupation :		
Email:		
Mom's Name:		Add Mom's Photo Here
Phone No:		
Occupation :		
Email:		
Siblings Names		Ages
EMERGENCY CONTACTS		
Contact 1		
Name:		
Relationship:	Phone No:	

Contact 2					
Name: _____					
Relationship: _____			Phone No: _____		
Contact 3					
Name: _____					
Relationship: _____			Phone No: _____		
MEDICAL INFORMATION					
Doctors Name: _____			Phone No: _____		
Specialty Providers					
Name: _____			Name: _____		
Phone No: _____			Phone No: _____		
Last seen: _____			Last seen: _____		
Name: _____			Name: _____		
Phone No: _____			Phone No: _____		
Last seen: _____			Last seen: _____		
Medications					
Name		Dose	Freq	Name	
Medical Conditions/Allergies					
Name			Symptoms/Reactions		
Has your child had any of the following?					
<ul style="list-style-type: none"> ▪ Chicken Pox ▪ Measles ▪ Mumps ▪ Frequent ear infections (>4 year) ▪ Frequent throat infection (>4 year) ▪ Wears glasses ▪ Heart murmur ▪ Kidney or bladder infection 			<ul style="list-style-type: none"> ▪ Frequent Bed wetting (>5 years old) ▪ Diabetes ▪ Asthma ▪ Allergies ▪ Broken Bones ▪ Head Injury ▪ Seizures ▪ Additional 		

Has your child ever been hospitalized or had surgery?
if yes, list age and reason:

FAVORITE THINGS

Food _____

Drink _____

Person _____

TV Show _____

Movie _____

Sport/Hobby _____

Celebrity _____

Brand _____

Artist _____

Song _____

Place _____

Thing _____

LONG RESPONSE QUESTIONS

1. What is your idea of a perfect day? What would you do? Where would you go? What would you eat?
Who would you have with you?

2. If you could choose a superpower which would it be? Why did you choose that power? Would you use
it for good or evil? What would you use the power for?

3. If you win the lottery, what's the first thing you would buy? Why?

PERSONALITY QUESTIONS

1. When criticized, does the child usually

- react emotionally and/or cry
- not cry or get emotional, although they may be confused or upset
- Do not know

2. When the child has done a good job at something, do they

- know that they've done well, and not need praise to reinforce this
- know that they've done well, but seek praise to affirm
- need for someone to praise them before they realize that they've done well
- Do not know

3. When speaking, does the child usually show more

- sensitivity to people's feelings
- directness and honesty
- Do not know

4. When interacting with others (NOT the parents), is the child more

- affectionate and cuddly
- reserved and doesn't really like to be fussed over
- Do not know

5. Is the child more interested in reading or hearing stories that are

- similar to real-life situations, with realistic characters
- fantasy-based, with unrealistic characters and situations
- Do not know

6. When upset about something, will it help the child more if you

- help them to logically solve the problem
- hug and comfort them
- Do not know

7. Does the child prefer to do a chore when

- they are told what steps should be taken to do the task
- they are given a general goal and left alone to achieve it in their own way
- Do not know

8. When meeting someone new, is the child more likely to be

- ready to think the best about the new person
- ready to think the worst about the new person until they get to know them
- Do not know

9. In the classroom, is it more important to the child that their teacher

- treats them fairly, i.e. gives them the grade that they deserve
- appreciates them as individuals and likes them
- Do not know

10. Would the child's attitude be more like:

- I want it the way I want it
- I take things as they come
- Do not know