

Early Years Experiences Collection at Kindergarten Registration

Student Name: _____ **Date of Birth:** _____

The following questions are about your child's participation in child care and activities in your community from birth until today. Answering these questions is **voluntary**, so thank you for taking the time to respond.

The answers you provide will be shared within the school to help our educators and principals support your child's transition to full-day kindergarten. The information will also be shared with the Ministry of Education, your school and child care system planners in your community. The information will help them to plan, coordinate and improve the programs and services for families and young children in your community.

The personal information is collected under the legal authority of the Education Act R.S.O.1980, s.8.1. If you have any questions, please contact your school principal directly.

CHILD CARE

The Ministry of Education strives to build a child care and early years system that better supports parents and gives children the best possible start in life. There are many types of child care services available in Ontario.

Types of child care

Full-time – More than 24 hours per week

Part-time – 24 hours or less per week

Parent/Guardian Care – Care provided by a child's parent or guardian

Unpaid Care - Care provided by friends, relatives or caregivers, other than the child's parent(s) or guardian(s), where no fees are charged to the parent(s) or guardian(s).

Paid Care –Care provided by friends, relatives, nannies, or home child care providers who charge a fee to provide care in a child's home or in the provider's home.

Licensed Home Child Care - These providers have a contract with a licensed home child care agency and use their own homes to look after children. The licensed home child care agency screens, approves and monitors the caregivers. Parents often pay their child care fees to the home child care agency.

Licensed Child Care Centre - These programs operate in a variety of settings including workplaces, private and public buildings, schools and places of worship. They include nursery schools, full-time or part-time child care.

1. For each age period, what was the MAIN type(s) of child care for the child you are registering for kindergarten? The age periods below match with the child care policies of the Ministry of Education. The age periods may not match exactly to your child's experience or transitions between different types of care. **Please select *all the type(s)* of care that you and your child used for each age period.**

If your child was cared for by a parent/guardian and did NOT participate in child care on a regular basis, please select Parent/Guardian Care – Full-Time.

Age of Child	Parent/ Guardian Care		Unpaid Care (e.g., Relative or Friend)		Paid Care (e.g., Friend, Nanny or Unlicensed Home Child Care)		Licensed Home Child Care		Licensed Child Care Centre		Don't remember /Prefer not to answer
	Full- Time	Part- Time	Full- Time	Part- Time	Full- Time	Part- Time	Full- Time	Part- Time	Full- Time	Part- Time	
0 up to 12 Months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Months to 18 Months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Months to 24 Months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24 Months to 2.5 Years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.5 Years up to Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. If the child you are registering for school participated in licensed child care in a centre or a home, please list the name(s) of your licensed childcare centre or licensed home child care agency, for each age period. If your child was in parent/guardian care full-time or participated in care with friend, relative, nanny or unlicensed home child care, do not include the name below, please select the box in the Not Applicable column.

Age of Child	Not Applicable	City/Community Name	Intersection Street Name	Name of Licensed Child Care Centre or Licensed Home Child Care Agency
0 up to 12 Months	<input type="checkbox"/>			
12 Months to 18 Months	<input type="checkbox"/>			
18 Months to 24 Months	<input type="checkbox"/>			
24 Months to 2.5 Years	<input type="checkbox"/>			
2.5 Years up to Present	<input type="checkbox"/>			

6. At each age, how often did the child who you are registering for school participate in other activities in your community? Other programs include: paid or free activities at libraries, community centres, religious organizations, cultural centres, registered children’s recreation programs (e.g., sports, dance, music, and gymnastics). **Please select one answer per row.**

Age of Child	Once or More Per Week	One to Three Times a Month	Several Times a Year	Once per Year	Did Not Participate	Don't Know/Prefer not to answer
0 up to 12 Months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Months to 18 Months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Months to 24 Months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24 Months to 2.5 Years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.5 Years up to Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Consider all the activities in the community that the child who you are registering for school participated in over the last few years. What 3 MAIN factors did you consider when you chose Ontario Early Years Child and Family Centre Programs or other activities in your community? Please select 3 factors from the list and write the letter for each in the 3 boxes below.

A. Transportation/Location	B. Affordability	C. Availability	D. Language/Culture
E. Hours	F. Staff	G. Special needs support/Inclusion	
H. Word-of-mouth recommendation		I. Type of Program	
J. Size of program/Number of participants		K. Not applicable/Prefer not to answer	
<input style="width: 100px; height: 20px;" type="text"/>		<input style="width: 100px; height: 20px;" type="text"/>	
<input style="width: 100px; height: 20px;" type="text"/>			