PHILIPPINE SCIENCE	HIGH SCHOOL SYSTEM
CAMPUS:	

PARENT QUESTIONNAIRE FORM

The adjustment and development of your child at PSHS is the main concern of the Guidance Unit. To do this, we need some information from you as his/her parent and would be in the best position to furnish us with the needed information. Please answer all the items honestly and accurately. Your response will be kept confidential.

Your Child's Name: John Vincent Ram	nada	<u> </u>
I. <u>INTEGRATION IN THE FAMILY</u>		
1.1 Did the child grow up with both parents?	[✓] Yes [] No	
If not, with [] Father only [✔]Mo	-	
If the child grew up with the guardian:		
	ple guardian name	Relationship: example guardian relation
Number of years the child stayed w	•	_
1.2 Does the child have specific duties at hom If yes, please enumerate below:	ne? [] Yes [✔] No	How often?
example duty 1		sometimes
example duty 2		always
example duty 3		never
1.3 How would you describe your child's beha	avior at home?	
example answer		
4.4 December 11 to the control of th		
1.4 Personality wise, how would you describe example answer	e your child?	
example answer		
1.5 Do you go out with your child during free	time? [✔] Yes [] No	If yes, how often? example often
II. HEALTH AND PHYSICAL DEVELOR	PMENT .	
04.4		/ TN M / TV / A1N
2.1 As parents, would you consider yourselv		
2.2 Has there been any serious disease(s) in	n the family? [✔] Yes ease(s) and the family member who	
example family member disease	ease(s) and the family member who	nas it.
2.3 How would you describe your pregnancy	with your child? [✔1 No	rmal [\${2.3difficult}] Difficult
		Overdue [] Induced [] Normal
2.5 Have you lost a child out of death?	[✓] Yes [] No	
2.6 Did your child experience a serious accid		
2.7 Does your child sleep well at night?	[✔] Yes [] No	
2.8 Approximately, how many hours does yo	our child spend in sleeping?	example child sleeping
2.9 Does your child eat well?	[🖋] Yes 🛛 No	
Impairment	Specifics	Diagnosed/ Undiagnosed
Physical	example physical	example physical diagnostic
Learning Disability	example learning	example learning diagnostic
Mental Disorder	example mental	example mental diagnostic
Autism Spectrum Disorder	example autism	example autism diagnostic
Others	example other	example other diagnostic

III. CHILD'S PRESCHOOL AND ELEMENTARY LIFE

	enroll in Preschool Level (Playsch					[] Yes	[🖍] No
3.2 Age of entry to				ple mor			
	(s) was the child most likely inter		example				
3.5 Describe the	t(s) was the child least likely inter child's relationship with his/her te	esteu III?	example		CI		
example ansv		acricis iii C	Jiaue Scilo	OI.			
	you visit and follow-up your child	d in school?	examp	le ansv	er		
	Non-Academic difficulties did yo						
example ans	•			0.000			
3.8 How do you e	valuate your child's academic pe	rformance	in Elementa	ary?			
[] Overachievi				-	at full capa	acity	[] Underachieving
	ou rate the child's social standing	with the otl				•	L C
	r []Average Popularity				rdly Noticed		[] Aloof
	d subjected to any disciplinary ac		[*] Yes		-		u
If ves. p	lease specify: example specifie	d	[•] . • •				
	d suffer from bullying?	[*] Yes	s II No				
If ves. n	lease specify: example specific	ed	Д				
, 555, p							
IV. RESIDEN	ICE WHILE AT PSHS						
A A NAME II - A CALLED							
•	g at the PSHS, where would you						
	Residence [] Guardian's Home	[] School	Dormitory	[] Otr	iers: <u>examp</u>	le other input	
	to stay at the dormitory,	uha aan ha	annraaaha	d to bo	المانطة مطلما	in hia/har atua	lino?
	nere someone here near PSHS v	vno can be	approache	a to ne	ip trie crilia i	in nis/ner stud	iles?
[] Y	'es [✔] No	16	Mana.		example na	me PSHS	
		If yes,	Name: Address:	_		dress PSHS	
4 2 2 How	4.2.2 How often will you be seeing your child?		Contact		example contact number example often		
	a city scholar, what will be his/he		transportat	ion in c			
		I [] Family-			3		
	· · · · · · · · · · · · · · · · · · ·	_ ,					
IV. <u>OTHER II</u>	NFORMATION .						
5.1 How much all	owance do you plan to give your	child?	example	allowa	nce		
	lan to give the allowance?	orma.	олатрю	anoma	100		
[] Daily	[] Weekly [nthly	[] Throug	ah the S	Stipend		
	ice of your child to study in PSHS	-	Под	J		Yes [] No	
	ose a course/degree/program in		vour child	what w		103 [[110	
example ans		oonogo ioi	your orma,		ouid it bo.		
	support your child while studying	in PSHS?					
example ans							
Name of Father:	example answer			Nome :	of Mathew	evamnle and	SWAr
Contact No.:				Name of Mother: example answer Contact No.: example answer			
Email Address:	example answer				ddress:	example answer	
Signature:	example answer			Signatı		example and	
orginature.	CAMITIPIO MITORIOI			oigriall		SAUTIPIO UTI	<u> </u>
GUARDIAN							
Name: example			F	Relation	iship with th	_	example answer
Home Address:	example answer					Contact N	
Office Address:	\${office-guardian}					Contact N	o.: example answer