How has your child been cared for since September 2021? Please check all that apply.

☐ In your home, by parent(s)
☐ In-home licensed childcare provider
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ Care provided by a family, friend, or neighbor/non-licensed provider (examples: grandma, sister, etc)
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ Anna’s Bananas
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ EarlyVentures Childcare
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ Hand in Hand Preschool
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ Head Start
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ Little Village Early Learning Center
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ Montessori Children’s House
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ Northfield Daycare Center
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ Northfield Montessori
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ Northfield Nursery School
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ Open Door Preschool
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ St. Dominic Preschool
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week
☐ Other. Please write in:
  ☐ 5–20 hours per week
  ☐ 21 or more hours per week

If your child did not attend daycare or preschool, indicate reason(s) from list below. Check all that apply.

☐ Reasons related to the Coronavirus Pandemic
☐ Timing
☐ Transportation
☐ Did not know about it
☐ Not interested
☐ Was too expensive
☐ Could not find information in my language
☐ Didn’t need it
☐ Other Please write in:

Did your child attend (either in-person or virtually) any of the following community programming in the last year? (Examples: YMCA, ECFE, library storytime, Community Education classes, dance or music classes, faith community programming, Sunday School, sports programs, swimming lessons.)

☐ YES
☐ NO

Has your child see a physician in the past year?

☐ YES
☐ NO

Has your child seen a dentist in the past year?

☐ YES
☐ NO