

**CHILD CARE CONNECTIONS QUESTIONNAIRE**  
**Woodinville Family Preschool ~ 2008-2009**

We are all interested in having the best care for our children with the least amount of stress to organize it. With this in mind, parents enrolled with WFP are invited to take advantage of the child care connections that can be developed from this questionnaire. The information you share here will be included in a members-only file on the WFP website where enrolled parents can go to find childcare solutions that will specifically enable you to attend class and/or help others attend class by providing childcare.

Please understand that this is simply an informal way for enrolled parents to make their needs known and to find solutions for their child care issues. Participation by WFP members is optional and is not an official part of the program at Woodinville Family Preschool.

Please return the completed 2-page questionnaire via fax [425-398-9657] or mail to the address below at your earliest convenience: **Attn: Child Care Connections, WFP, P.O. Box 125, Woodinville, WA 98072.** Within 7-10 days, your information will be entered on the WFP website ([www.woodinvillefamilypreschool.org](http://www.woodinvillefamilypreschool.org)) under the Child Care Connections section.

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**Parent Name:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**1. Are you able to provide child care for others?**

- Yes  No [If no, skip to Q. 6]

**2. IF YES, which WFP classes can you provide child care for? Additionally, what is the maximum number of children you can provide care for: [Check all that apply.]**

- |   |                        |
|---|------------------------|
| <input type="checkbox"/> Infant class, 0-6 mos. (Thurs. 1:30-3:10 pm)   | No. of children: _____ |
| <input type="checkbox"/> Infant class, 6-12 mos. (Fri. 11:30am-1:10 pm) | No. of children: _____ |
| <input type="checkbox"/> Toddler AM (Fri. 9:15-11:00 am)                | No. of children: _____ |
| <input type="checkbox"/> Toddler PM (Thurs. 6:15-8:00 pm)               | No. of children: _____ |
| <input type="checkbox"/> One Day A (Thurs. 9:15-11:00 am)               | No. of children: _____ |
| <input type="checkbox"/> One Day B (Thurs. 11:15 am-1:00 pm)            | No. of children: _____ |
| <input type="checkbox"/> 3-Day Class (MTW 9:15-11:40 am)                | No. of children: _____ |
| <input type="checkbox"/> Pre-K Class (MTW 12:15-2:45 pm)                | No. of children: _____ |

**3. IF YES, what child care options can you provide: [Check all that apply.]**

- I can pick-up child(ren) at WFP's parking lot.  
 Children need to be dropped off and picked up at my house immediately before and after class.  
 I can provide child care at someone else's home.  
 Other: \_\_\_\_\_

**4. IF YES, what is your preference for compensation: [Check all that apply.]**

- I'd be willing to provide child care in exchange for child care from another WFP parent.  
 I'd be willing to provide child care for a fee negotiated between the parent needing child care and me.  
 Other: \_\_\_\_\_

**5. Can you provide childcare outside of preschool hours?**

- Yes  No

**6. Do you anticipate needing child care so you can attend a WFP class during the 2008-2009 school year?**

- Yes     No, but I have child care needs outside of the hours of my preschool classes. *[Please skip to Q. 8]*     No, my child care needs during my class(es) are covered. *[This completes the questionnaire. Thank you for your time. The information you shared here will be included in a members-only file on the WFP Web site [www.woodinvillefamilypreschool.org](http://www.woodinvillefamilypreschool.org)] shortly.*

**7. During which WFP class(es) are you enrolled with one child and need care for your other child(ren)? Additionally, please tell us the names, ages and gender of siblings needing care while you are in class: *[Check all that apply.]***

Class Enrolled In	Name of Sibling Needing Care	Age	Gender
<input type="checkbox"/> Infant class, 0-6 mos. (Thurs. 1:30-3:10 pm)			M/F
<input type="checkbox"/> Infant class, 6-12 mos. (Fri. 11:30 am-1:10 pm)			M/F
<input type="checkbox"/> Toddler AM (Fri. 9:15-11:00 am)			M/F
<input type="checkbox"/> Toddler PM (Thurs. 6:15-8pm)			M/F
<input type="checkbox"/> One Day A (Thurs. 9:15-11:00 am)			M/F
<input type="checkbox"/> One Day B (Thurs. 11:15 am-1:00 pm)			M/F
<input type="checkbox"/> 3-Day Class (MTW 9:15-11:40 am)			M/F
<input type="checkbox"/> Pre-K Class (MTW 12:15-2:45 pm)			M/F

**8. How would you prefer to compensate the WFP parent who is providing child care? *[Check all that apply.]***

- I am willing to pay a fee to be negotiated between the child care provider and me.  
 I would like to exchange child care with another WFP parent.  
 Other: \_\_\_\_\_

**9. Please explain any special needs any of your children may have: (For example, allergies/aversions to food, behavioral issues, being potty-trained, learning to feed self, etc.)**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**10. Please share your child care preference. *[Check all that apply.]***

- I can hand-off my child(ren) at WFP's parking lot.  
 I can drop-off and pick-up my child(ren) immediately before and after class at the child care provider's home.  
 I'd really prefer child care help to come to my home.  
 Other: \_\_\_\_\_

**11. If you have child care needs outside of the hours of your preschool class(es), please list the days of the week and times below.**

Day of the Week	Time	Name of Child Needing Care	Age	Gender
				M/F
				M/F
				M/F
				M/F
				M/F

*Thank you for your time. The information you shared here will be included in a members-only file on the WFP Web site [www.woodinvillefamilypreschool.org](http://www.woodinvillefamilypreschool.org)] shortly. Please visit the site to find and connect with WFP members who need child care at the times you can provide OR are able to provide child care options that meet your needs.*