

# Getting to Know Me

Use this form to introduce new people to your child and their health conditions or diagnoses.  
Tip: Save a copy of the completed form on your computer to update when you need it.

<b>My name:</b>	<b>Nickname:</b>
<b>Date of birth:</b>	<b>Today's date:</b>
<b>Parent/Caregiver name:</b>	<b>Phone:</b>
<b>Parent/Caregiver name:</b>	<b>Phone:</b>
<b>A little about me:</b> (interests, hobbies, favorite things)	
<b>My strengths:</b> (things that are easy for me)	
<b>My challenges:</b> (communication, feeding, learning, mobility, social, energy, behavior)	
<b>My life in the community:</b> (school, place of worship, my favorite places)	
<b>My diagnosis or diagnoses:</b>	

**Things to know about my health or condition:**

**My equipment and assistive technology devices:** (braces/orthotics, walker, wheelchair, communication devices, home O<sub>2</sub>, insulin pump, suction)

**My current medicines/doses:**

**My allergies and dietary restrictions:**

**Things to avoid:** (activities, procedures)

**Ways you can be helpful to me:**

This form is available at [www.cshcn.org/planning-record-keeping/documents/](http://www.cshcn.org/planning-record-keeping/documents/)



Center for Children  
with Special Needs  
[www.cshcn.org](http://www.cshcn.org)

