

## Troop 280 Summer Camp Confidential Questionnaire

This questionnaire will furnish the adult leadership with information necessary to accurately assess your son's physical and psychological needs and properly safeguard his health. **Too much emphasis cannot be placed on the importance of this information;** therefore, parents are asked to exercise the utmost thought and consideration in answering these questions. Your son's welfare is important to us, so please be as precise and elaborate as possible.

Camper's Name \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

List members of Camper's household (name, age, relationship)

Describe any unusual family circumstances: Foster Parents, Step-Parents, recent deaths, divorce, separations, etc.

Mark character traits most commonly exhibited around other children ("O" for often and "S" for sometimes):  
\_\_\_\_ shares \_\_\_\_ leader \_\_\_\_ energetic \_\_\_\_ affectionate \_\_\_\_ gets own way \_\_\_\_ timid \_\_\_\_ easily frustrated  
\_\_\_\_ selfish \_\_\_\_ follower \_\_\_\_ quiet/shy \_\_\_\_ unresponsive \_\_\_\_ gives in easily \_\_\_\_ aggressive

Frequent Sleeping Habits: \_\_\_\_ talks in his sleep \_\_\_\_ sleepwalks \_\_\_\_ nightmares \_\_\_\_ wets bed

Eating Habits: Eats: \_\_\_\_ moderately \_\_\_\_ much \_\_\_\_ little \_\_\_\_ often \_\_\_\_ picky

Has strong dislike for what foods? \_\_\_\_\_

Are there any foods that cause behavior changes? (if so, please list food and effect)

Is he under the regular care of any physicians? (explain reasons)

Does he take any regular medication? (please specify and give purpose)

Has there been a change in his medication from the school year? (if so, what)

Has he had any emotional disorder? (please explain)

Has he had any discipline problems at school? (please explain)

Does he have any unusual fears? (please list)

What are his chief interests and hobbies?

What are his special talents?

Does he have any learning disabilities? (please explain)