

Am I Ready?
(Parent Questionnaire)

| | <u>YES</u> | <u>NO</u> | <u>N/A</u> |
|---|-------------------|------------------|-------------------|
| 1. I know the route that my child takes to get to and from school and other activities. | () | () | () |
| 2. My child knows how to contact me at work and/or my cell phone. | () | () | () |
| 3. a) Arrangements have been made with a relative, friend or neighbour for my child to contact them if needed. | () | () | () |
| b) My child knows how to contact a relative, family friend or neighbour if needed. | () | () | () |
| 4. My child knows the rules of the road and how to cross the street safely. | () | () | () |
| 5. My child knows when to call 911 or the local emergency number. | () | () | () |
| 6. My child knows basic first aid. | () | () | () |
| 7. There is a first aid kit in our home and my child knows where to find it. | () | () | () |
| 8. My child knows what to do if someone comes to the door or calls on the phone. | () | () | () |
| 9. My child would know what to do if they lost their key. | () | () | () |
| 10. My child knows how to make a healthy snack safely. | () | () | () |
| 11. We have discussed the rules about: friends visiting, watching TV, alcohol and prescription drugs, types and location of physical activity and doing homework. | () | () | () |
| 12. My child is ready to be left alone at home. | () | () | () |