

CHILD'S NAME \_\_\_\_\_

FAMILY NAME \_\_\_\_\_

SIBLING NAMES AND AGES

\_\_\_\_\_

**TELL ME A LITTLE BIT ABOUT YOUR CHILD AND CONTINUE ON BACKSIDE IF NECESSARY**

1. What is/are the most important thing/s I should know about your child? (ex: rule follower, needs time to warm up to new people, wants to be a helper)

\_\_\_\_\_

2. What is your child passionate about, inside and outside of school? \_\_\_\_\_

\_\_\_\_\_

3. I would love for my child to improve \_\_\_\_\_

\_\_\_\_\_

4. You will know my child is struggling with something when (ex: maybe won't ask for help; day dreams) \_\_\_\_\_

\_\_\_\_\_

5. My child learns best (ex: by working out the issue/learning something new by her/himself) \_\_\_\_\_

\_\_\_\_\_

6. \_\_\_\_\_ is what my child likes best about school.

7. One challenge my child has at school is \_\_\_\_\_

\_\_\_\_\_

8. My child relates well with children who ( ex: have common interests, are kind)

\_\_\_\_\_

9. Does your child have a favorite book? \_\_\_\_\_

10. What fears does your child have? (Big or small) ( ex: thunder, fear of embarrassment, not getting the answer)

\_\_\_\_\_

11. What is the best way to motivate him/her when things get "sticky"? (praise, incentives, encouragement, etc)

\_\_\_\_\_

\_\_\_\_\_

**If you'd like, please tell me a little bit about your family, especially if it will benefit your child.**

1. Using the strengths you have, in what ways would you like to be involved in our Classroom Family? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Does your family have any special celebrations or traditions you would like to share with the class? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Is there anything else I should know that will help your child be successful in school?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Do you have any questions for me?

\_\_\_\_\_

\_\_\_\_\_