

Kindergarten

Questionnaire

Child's Name _____ (as you want him/her to be called at school)

Parents:

Mother's Name _____ Father's Name _____

Preferred contacts:

email: _____ phone: _____

Please list the names and ages of your child's brother(s) and sister(s)

Did your child attend preschool? _____. If so, where? _____

What are your child's interests/hobbies?

What are your child's strengths?



Please briefly describe areas where you would like to see your child grow this year.

Is your child afraid of anything?

What 3 words would you use to describe your child?

Is there anything else you would like to tell me about your child?

This will be an exciting year!

I look forward to getting to know you and your child.

