

INTRODUCE US TO YOUR CHILD

Child's Name: _____

What you prefer your child to be called: _____

Birthday: _____

Allergies: _____

Please list who your child lives with. If your child splits time between two homes, please describe arrangement: _____

My child's "normal" schedule is.... (when is your child dropped off & picked up)

My child's favorite activity or toy is: _____

My child has shown to be afraid of: _____

My child's overall personality is: _____

Please list 3 things that you would like your child to work on at school.

1. _____

2. _____

3. _____

Do you, as a parent, have skills, hobbies, special knowledge of resources you can share to enhance our curriculum?