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|---------------|--|---|--|--------------|
| | Dear Parent or Guardian, I would like to welcome your child and family to Kindergarten! I can't wait to get to know my students and their families. In order to help me do this, you will find a series of questions below that will help me get familiar with your child. Please complete the questionnaire and send it to me on the first day of school. Thank you! | | | |
| | Child's Name: Child's Age: Birthdate: Parent/s Name: What is your preferred method of communication? E-Mail/s (for my distribution list): | | | |
| | <u> </u> | Phone: (H) | (C) | |
| | 1. | What is your biggest hope for your child this year? | | |
| Second Second | 2. | What do you feel are yo | Vhat do you feel are your child's strengths? What is he/she good at? | |
| | 3. | In what ways would yo | u like to see your child grow | w this year? |

4. What questions or concerns does your child have about school? (Complete this part with your child).

5. What are some of your child's interests/hobbies?

6. What is your child looking forward to in Kindergarten?

7. Does your family have any celebrations or traditions that you'd like to share with the class?

8. Does your child have any siblings?(names and ages please)

9. Is there anything else you'd like me to know about your child?

Thank you so much for taking the time to fill out this questionnaire. Your responses will be very helpful!