

# Parent Survey

Child's Name \_\_\_\_\_ Date \_\_\_\_\_

I am looking forward to working with you and your child this year. Please help me begin to get to know your child by answering the following questions and returning this form during the first week of school.

What are your child's interests and hobbies? What do you and your child enjoy doing together?

What are the names and ages of your child's siblings?

What are your child's strong points?

Do you have any tips or suggestions that might help your child learn?

Is there anything else you would like me to know about your child?  
*(use back of sheet if necessary)*