Please Return to Your child’s teacher or the main office by April 3rd

Child’s Name:

Child’s Current Teacher:

Person Completing the Form:

What does your child enjoy most about school?

What are you and your child most excited and/or concerned about regarding next year?

What motivates your child to learn?

What other information would you like us to know about your child? Examples might include previous problems with peers; health conditions or concerns; or issues at home that might impact school. Please use the back of this form for additional comments.