

Getting to Know Your Child

Student name: _____

Birthday: _____

Parent's names: _____

Best contact phone: _____

What are your child's strengths? _____

Any challenges? _____



What are five words that
describe your child?

- 1.
- 2.
- 3.
- 4.
- 5.



Are there any holidays your family does NOT
celebrate?

Are there any personal or medical concerns that
need to be known when dealing with a solution
for your child?

What motivates your child?

What are three goals for your child
this year?

- 1.
- 2.
- 3.