

Kindergarten Info:

Student _____

Characteristics that best describe your child:

Friendly ____ Sad ____ Leader ____ Talkative ____ Follower ____ Shy ____
Affectionate ____ Independent ____ Moody ____ Quiet ____ Dependent ____
Cries Easily ____ Fearful ____ Nervous ____ Shares Easily ____
Even Tempered ____ Prefers to be Alone ____ Very Active ____ Shows Off ____

How do you discipline your child? How does your child respond?

What does your child like to do best at home?

Does your child have any special fears (ie dogs, darkness, etc.)? _____

Do you have any special concerns about your child's self-image, interpersonal relationships or behavior? _____

Does anyone read to your child? _____ Who? _____

Has your child ever been to a nursery school or day care center? _____

Where? _____ How long? _____

Please add any information that you think the teacher should be aware of in order to work effectively with your child. _____

Briefly describe what you hope your child will gain or accomplish during his/her Kindergarten year: _____

Are you interested in being a Classroom Volunteer ____ Parent Liaison ____ Outside Helper (From home) _____

Do you have any special talents you would like to share with the class? _____
