**Child’s Name:**

**Class:**

What are your child’s major strengths?

What do you believe are his/her weaknesses, areas of concern or issues that need addressing?

What is their favourite thing about school? Why?

Describe your child’s interests and after school activities (please also include nights that might be busy for your family)

Describe your child’s feelings towards school

Tell me about your child’s friends

How do you feel I, as your child’s teacher, can best help him/her this year?

Is there any specific information I need to know in regards to your child’s learning?

Additional Information (if required)