



Parent Survey

This information sheet is to help me better understand your child. Please be honest and provide details where necessary.



1. Student Name: _____ Date of Birth: _____
2. Name of Parent/GU/Guardian? _____
3. Home Address: _____
4. Please check the best way for you to be contacted if needed.
Home phone: _____
Mom's work: _____ Mom's cell: _____
Dad's work: _____ Dad's Cell: _____
5. Emergency Contact Person (This information must be on file with the front office). Contact person/relationship to student: _____
Phone number: _____
6. Are any languages other than English spoken at home? _____
7. What is the primary way your child will go home each day? _____
*Please send a note if there are going to be any changes in dismissal.
8. Do you have any special concerns about your child? (Academically, socially, medically, etc.)? _____
9. Please list any foods, stings, etc. that may cause allergic reactions with your child. _____
10. Please list two goals you would like to set for your child this year. _____
11. Please tell me, in one million words or less, if there anything else I should know about your child. Feel free to brag! Use the back if you need to.

