Welcome to Second Grade

As parents, you know your children best. Please help me get to know them through your eyes by taking a few minutes to fill out this form. Thank you for your time.

Childs Name
Mother's Name
Father's Name
Names and ages of siblings
What are your child's strengths?
In what areas do you think your child needs to grow?
What are your child's interests?
How would you like to see your child grow academically this year?
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How would you like to see your child grow socially this year?
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Please use the back of this sheet for any other information you would like to share with me about your child.