



What You Need to Know About My Child

Child's Name: _____

Years in Williamsburg Area: _____

Previous Location and year of move:

Primary Language Spoken at Home: _____

Sibling Name	Age	School	Teacher
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Things my child can do well:

Areas where my child needs support / encouragement:

My child participates in these extraCurricular activities:

My child likes: _____

My child dislikes: _____

My child is afraid of/when:

At home my Child Has these Responsibilities / Jobs:

I Reward my child at Home by: _____

My child is especially Friendly with:

Signature: _____ Date:

Please share any other information that might be helpful for me to know about your child's preferences, interests, and learning style.