

**SCHOOLHOUSE 226**  
**GETTING TO KNOW YOU**

Child's Full Name \_\_\_\_\_ Nickname \_\_\_\_\_

Address \_\_\_\_\_  
City State Zip

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Dad's Work \_\_\_\_\_ Mom's Work \_\_\_\_\_

**ABOUT THE FAMILY**

Dad's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Mom's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Siblings (Names and Ages) \_\_\_\_\_

Which relatives does your child see regularly?  
\_\_\_\_\_

Pets and their names \_\_\_\_\_

**ABOUT THE CHILD**

Birth Date \_\_\_\_\_ Current Age \_\_\_\_\_

Allergies \_\_\_\_\_

Medications or other special needs  
\_\_\_\_\_

Favorite Foods \_\_\_\_\_

Favorite Books \_\_\_\_\_

Favorite Toys or Games \_\_\_\_\_

Special Interests \_\_\_\_\_

Talents \_\_\_\_\_

**SEE REVERSE**

## ABOUT SCHOOL

Check tasks your child can do independently:

\_\_\_\_\_ Go to the bathroom

\_\_\_\_\_ Dress his/her self

\_\_\_\_\_ Feed his/her self

What do you want your child to gain from school?

---

List any special needs that will help the teacher to better understand your child.

---

---

---

---

List any social or intellectual goals you would like your child to accomplish this year.

---

---

---

---

Please share any other comments or information that you feel would best help Schoolhouse 226 serve your child.