



“Getting to Know You!”

Family Information Form for Initial conferences

Student's Name: _____

Student's age: _____ Birthday: _____

Name you would like us to use for your
child: _____

Parents: _____

Home Address: _____

Email address: _____ Email address: _____

Phone Number: _____ Phone Number: _____

Siblings' names and ages: _____

My child's strengths are....

My goals for my child are...

My child is having fun with...

(see back for further questions)

To ensure a better understanding of your family's unique flavor please describe.....

1. Highlights a few of your family's values, beliefs, and/or religious experiences:

2. List the primary and, if applicable, a secondary language spoken:

3. Describe any special ethnic or cultural celebration or customs:

4. Any particular food concerns, allergies or food preferences:

5. Any special needs or concerns regarding the development of your child:

Please attach a family photo (recently taken) to share with the Classroom community.