

BEGINNING OF THE YEAR CONFERENCE
5TH & 6TH GRADE QUESTIONNAIRE

STUDENT'S NAME _____ GRADE _____

TEACHER'S NAME _____ DATE _____

1. What special interests or abilities does your child have? _____

2. How would you describe your child's personality? _____

3. What are your child's academic strengths? _____

4. Are there things that I should know that will help me understand your child's needs - (for example) health, discipline, out-of-school activities, etc? _____

5. Have there been any changes during the past year that would affect your child's school performance? _____

6. What do you feel is the most important thing the school can do for your child this year?

7. Best time to contact you _____ at telephone # _____
8. Additional comments: _____

Parent Signature

Please bring supplies and questionnaire to conference