Child’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Families as Partners Information Form**

**Supporting Learning at Home and School**

We are eager to gain a deeper understanding of your child and their unique qualities. Your valuable insights will enable us to tailor our educational program to meet their individual needs effectively. We encourage you to have a conversation with your child to incorporate their perspective. All information will be kept confidential. Thank you!

How is your child feeling about returning to school? How are you feeling about this? Explain.

What language(s) are spoken at home?

How is time generally spent at home? What are your child’s special interests, extra-curricular activities, or special abilities? What will your child be involved in this year?

Write five words that best describe your child’s character.

What are things your child is most passionate about?

What makes you feel proud of your child?

Describe your child’s strengths and skills (academic and non-academic).

Describe the areas your child most needs support (academic and non-academic).

What triggers frustration or withdrawal? What is the most effective way of supporting them with challenges?

What are things that have really helped your child educationally in the past, and why do you think these are so successful?

Please discuss this question with your child. What are their main goals and yours (short and long-term)? By the end of the year, I hope that…

* My child’s goals:
* My goals for them:

List any concerns (medical, personal, academic, social, physical, emotional, etc.).

We would appreciate other suggestions or comments that would help us support your child. How can we make this a great year? What else is important for us to know?

Thank you very much for taking the time to complete this form. Please return as soon as possible. Looking forward to meeting you soon!