

Getting to Know You

Student's name: _____

Parent(s) name(s):

Parent(s) email(s):

Student email: _____

What would you like us to know about your child?

Any food allergies? _____

What is a favorite treat? _____

What grade and school are they in this year? _____

Which activities do they participate in? Please include anything that includes a public performance (music, drama, sports, robotics, etc.)