

**ALL ABOUT** \_\_\_\_\_ 's \_\_\_\_\_  
 (student's name) (parent/family member)

In each category, check the boxes that sound the most like YOU. I will use this information to guide my instruction. Thank you for giving me the opportunity to learn more about you!

**PLEASE COMMUNICATE WITH ME VIA...**



<input type="checkbox"/>	email.
<input type="checkbox"/>	phone.
<input type="checkbox"/>	blog posts that let me know what's going on in class.
<input type="checkbox"/>	Other: _____.
<input type="checkbox"/>	

**I PREFER TO HEAR FROM TEACHERS AT LEAST ONCE PER...**



<input type="checkbox"/>	day.
<input type="checkbox"/>	week.
<input type="checkbox"/>	month.
<input type="checkbox"/>	year.
<input type="checkbox"/>	

**IN THE PAST, COMMUNICATION WITH TEACHERS HAS BEEN...**



<input type="checkbox"/>	mostly positive.
<input type="checkbox"/>	neutral.
<input type="checkbox"/>	mostly negative.
<input type="checkbox"/>	Other: _____.
<input type="checkbox"/>	

As a parent, I am most proud of: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_.

The one thing I would like teachers to understand about my son or daughter is: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_.