



Parent Questionnaire

Please complete the parent questionnaire, so we have a better understanding of you and your child.

Your First and Last Name _____

Child's First and Last Name: _____

Child's Grade Level (2021-2021): _____

1. What are your child's greatest strengths?

2. What is your child's greatest area of need? What steps have you taken to address those needs?

3. What are your academic and athletic goals for your child?

4. Describe your child's view of academics and athletics.

5. Does your child receive additional services outside of the classroom eg. tutoring, enrichment etc.?

6. Please provide any additional information to help us better understand you and your child.