

**Good Samaritan School**  
333 NW 35<sup>th</sup> Street, Corvallis, OR 97330  
Elementary Grades



Let's Get Acquainted...

Please take a few minutes to tell us about your child using this questionnaire.  
Thank you for your time and support!

- Child's Name: \_\_\_\_\_
- Nickname your child would prefer to use: \_\_\_\_\_
- Current Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Today's Date \_\_\_\_\_
- Name of Parent/Guardian filling out this form \_\_\_\_\_

People your child spends time with:

<u>Name</u>	<u>Age</u>	<u>Relationship</u>	<u>Grade/School – if applicable</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

My child is great at: \_\_\_\_\_

My child's favorite activities, interests, sports and hobbies are:  
\_\_\_\_\_

My child's least favorite things: \_\_\_\_\_

My child's gifts and talents are: \_\_\_\_\_

My child learns best when: \_\_\_\_\_

Areas in which I'd like to see my child improve: \_\_\_\_\_

When your child receives a gift that needs to be assembled, does he/she read the directions first, or does he/she dive right in and try to figure it out as he goes?

\_\_\_\_\_

Is your child more apt to complete a three-step direction if you simply give him oral instructions, or do you need to write the instructions for your child?

\_\_\_\_\_

Would your child rather watch television or play outside? \_\_\_\_\_

Which would your child prefer to do: write a story, read a story, or act out a story?

\_\_\_\_\_

Would your child rather make a craft after hearing the directions, reading the directions, or watching someone make a sample? \_\_\_\_\_

**Reading and Audio Visual**

• Reading interest (self-motivated) Yes  No

• Public Library Usage Yes  No

• Daily reading with family Yes  No

• Listens to books on tape/cd Yes  No

• Favorite books/series \_\_\_\_\_

**Television usage:**

• Approximate hours per week \_\_\_\_\_

○ Favorite shows/programs \_\_\_\_\_

**DVD/Movie usage:**

• Approximate hours per week \_\_\_\_\_

○ Favorite movies \_\_\_\_\_

Please share information that will help make your child more comfortable in school:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parents gifts and talents – What might you want to share with our program?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_