

KENT SCHOOL DISTRICT

PARENT QUESTIONNAIRE

Student Name: _____
First Middle Last Likes to be Called Birth Date

Name of Parent(s) or Guardian(s): _____

Address where student is living: _____

FAMILY BACKGROUND

Please list the names of the adults the student resides with and the relationship to him/her:

| <u>Other children in the family:</u> | <u>Age</u> | <u>School/Grade</u> |
|--------------------------------------|------------|---------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

What language is spoken most often in your home? _____

Has there been an event (divorce, death, illness, etc.) in the family that might affect your child?

Do you celebrate birthdays and/or holidays in your home? ____ Yes ____ No If no, please explain:

SCHOOL BACKGROUND

How many schools has your child attended in the last year? _____

Name, district, and state of the last school attended: _____

Does your child have any unpaid fines or fees at prior schools? ____ Yes ____ No

If yes, please explain: _____

Has your child been in any special programs? (Special Education, ELL, etc.) ____ Yes ____ No

If yes, please list: _____

How does your child like school? Previous teachers? Other students?

How is your child doing in school? (Grades, teacher feedback, etc.)

Are there any past, current, or pending disciplinary actions involving your child? ____ Yes ____ No

If yes, please explain: _____

Does your child have any history of violent behavior, sex or criminal offense, or controlled substance or alcohol violation? ____ Yes ____ No

If yes, please explain: _____

Briefly describe your child's strengths and weaknesses: _____

Additional information: _____

Parent or Guardian Signature

Date

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