

Parent Survey

We want to meet the needs of your child from the very beginning of the school year. The information you're able to provide is an invaluable teaching tool and makes it much easier for us to help your child be successful. We greatly appreciate your time and we will keep all information confidential.

Parent(s)/Guardian(s) name: _____

Your Child's Name (please also included name they prefer to be called): _____

Home phone: _____

(If your child lives in multiple households, please share all appropriate numbers.)

Work phone: _____

Good time to call: _____

E-mail address I should use to contact you: _____

Do you prefer to correspond via e-mail or phone? _____

Do you have any special skills or interest areas that you would be willing to share with the class? _____

1. Why have you chosen Montessori education for your child?

(please use back if necessary)

2. What are your child's strengths (not only academic)? What is she/he most interested in?

3. What academic skills do you view your child needs more focus?

4. Developing a productive and healthy relationship with your child is one of our highest priorities. Getting to know a student can make all the difference in their school success. We take this opportunity very seriously. We believe as a parent you play a key role in assisting us learn more about your child. Please provide us with any tips or suggestions for helping your child succeed.

5. Is your child shy, sensitive or nervous about anything we should be aware of?

6. Is there anything your child struggles with that you would like us to know about?

7. If any of your child's former teachers have been particularly successful with them, what qualities or skills did that teacher possess that you or your child appreciated?

8. In times of stress, how does it show in your child's behavior? What behaviors should we look for? How does your child deal with frustration? How do, or don't they communicate stress or frustration at home or with peers?

9. When your child has an hour of free time, how do they most likely use that time?

10. What kind of reading material does your child enjoy?

11. What do you most admire about your child? _____

Thank you for taking the time to complete this valuable survey. We look forward to developing relationships with you. Please feel free to include any additional information you would see valuable in helping us meet your child's potential.