



BUILDING BLOCKS CHILDCARE CENTRES

LOVE | LAUGHTER | FRIENDSHIP | FAMILY

Please Tell Us About Your Child

My child's name is _____

My child's favorite food is _____ Allergies _____

My child's interests and/or hobbies include _____

My child's favorite activities are _____

My child's special qualities include _____

My child approaches learning

_____ with excitement

_____ with confidence

_____ with curiosity

_____ with reluctance

_____ with anxiety

_____ without interest

My child needs help with _____

Academically, this year I would like to see my child work on _____

Socially, I would like to see my child work on _____

Please tell us about your culture and the language you speak at home _____

Would you be interested in sharing with your child's class some information about your culture?

Questions or concerns that I have _____

Please fill this out and return as quickly as possible. Thank you for helping us make this a great year for your child.

Sincerely, Your Child's Teacher.