Running River Parent Survey New Student

Child's Name:	Birth Date:
What are some of your child's strengths and qualities:	
What are some of your goals for your Academic:	child this school year?
Physical:	
Social/Emotional:	
What are your child's special interests	s or passions?
Do you work on academics at home?	If so, what (i.e. reading together)?

Does your child spend quiet alone time on a regular basis?	
Are there situations that you have noticed that are especially distracting or helpful to your child's learning?	
Were there any significant milestones, changes, or events over the summer that you feel we should be aware of?	
Do you have any projects, special interests, hobbies, etc, that you wish to share with the children this year?	
Is there anything else you would like us to know about your child (concerns, insights, etc)?	