



Application #: _____

"We Are Community Builders"

UC TEAMS Charter School
515-517 West Fourth Street
Plainfield, NJ 07060

GETTING TO KNOW YOUR CHILD

(Please duplicate form for each child)

NAME OF STUDENT:

1. Describe your child's personality:

2. Describe your child socially:

3. What are your child's scheduled activities outside of school (lessons, teams, organized groups, etc.)?

4. What are your child's interests/hobbies? How does your child like to spend playtime? Quiet time?

5. Describe your child's learning style. How does your child learn best?

6. In what areas do you feel your child could improve?

7. Describe your child's previous school experience:

8. Please list three goals you would like your child to achieve during the coming year.

Signature of Parent or Guardian

Date