

# Cardinals Survey

Child's name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Describe your child's personality. \_\_\_\_\_

\_\_\_\_\_

What are your child's favorite activities and toys? \_\_\_\_\_

\_\_\_\_\_

How does your child feel about school? \_\_\_\_\_

\_\_\_\_\_

What are your child's strengths? \_\_\_\_\_

\_\_\_\_\_

What growth would you like to see in your child this year? \_\_\_\_\_

\_\_\_\_\_

Does your child still nap? \_\_\_\_\_

\_\_\_\_\_

Is there anything else you would like us to know about your child? \_\_\_\_\_

\_\_\_\_\_