KENSINGTON ELEMENTARY SCHOOL
PARENT PERCEPTION FORM

Parents are encouraged to discuss these questions with their child

Student's Name _____ **Current Teacher** _____
Grade _____ **Date** _____ **School Year** _____

For your child, what are some of the most important elements in a classroom he/she needs to be successful as a learner?

_____
_____
_____

These are some of my child's strengths as a learner:

_____
_____
_____

Some of my child's interests are:

_____
_____
_____

What does your child enjoy doing in school?

_____
_____
_____

What are your goals for your child for the next school year?

_____
_____
_____

Please circle the appropriate response for each of the following statements:

My child likes to read at home:

Frequently | Occasionally | Rarely

When faced with something difficult my child tends to :

Get frustrated easily | Stick with it until completion | Want help

When doing a task my child usually tends to :

Do the minimum required | Do far more than expected | Avoid it

For my child homework is usually done:

Without much fuss | Reluctantly | With a major struggle

Circle the words which best describe your child:

Outgoing	Shy	Imaginative	Quiet	Responsible
Humorous	Kind	Perfectionist	Sensitive	Noisy
Organized	Thinker	Fearful	Impulsive	Random
Leader	Follower	Creative	Caring	Worker

If you wish to add further information to give us a better understanding of your child, his/her needs, and the type of learning environment in which he/she works best, please use the Parent Input Form on the back of this sheet. Please return to school by April 19, 2013.