



What Makes Me Special

My name is _____ and I like to be called _____.

My birthday is _____ and I am _____ years old.

My primary language spoken at home is _____.

	<u>Name</u>	<u>Relationship</u>
I live with:	_____	_____
	_____	_____
	_____	_____
	_____	_____

My family pets are _____.

Cultural things I want you to know about my family are _____.

I like the following things _____.

I dislike the following things _____.

I am afraid of _____.

To comfort me when I am upset, I like _____.

- This is my first experience in a school setting
- I have been to school before. The name of my last school was _____.

	<u>Words</u>	<u>Meaning</u>
Words I use in my vocabulary:	_____	_____
	_____	_____
	_____	_____
	_____	_____

Toileting

- I am potty trained
- I am not potty trained

Words/terms I use at home for toileting _____

Special Needs or Accommodations: Please note any unique factors or circumstances such as a long illness, loss of a parent by death or separation, any major event in your child's life that he/she may have trouble processing. This is to aid our staff in best meeting the needs of your child and help adjust to our program.

Any further information you would like to share:
