



Student Profile

Childs Name _____ Class _____

Parent/Carer _____ Date _____

We invite all parents to complete the following profile of their child with as much detail as possible. The confidential information you provide here will help us to cater for your child's needs.

My child:	please tick	Usually	Sometimes	Rarely
Enjoys coming to school				
Accepts responsibility				
Demonstrates initiative				
Demonstrates self-control				
Is considerate, courteous and respectful				
Is responsible for belongings at home				
Is well organised for school each day				
Completes tasks at home within the expected time frame				
Listens to instructions				
Participates in family discussions				
Plays outdoors				
Spends a lot of time on the computer				
Reads at home				
Completes homework without prompting				
Works cooperatively with friends				

What activities does your child enjoy in school?

What interesting activities and hobbies does your child enjoy out-of-school?

In what areas does your child show confidence?

Tell us something about your child that you think we may not know



Has your child had:	Yes	No		
Speech therapy				
Occupational therapy?				
Psychological testing?				
Other relevant assessments?			If so, please elaborate:	

How can we best help your child?

Additional comments:

Thank you for completing this profile of your child.

Please return to your class teacher in a sealed envelope.