

Parent Questionnaire

Please answer all of the following questions:

1 Child's name _____ Current Grade _____

2 Previous school(s) your child attended:

School Name _____ Year _____ - _____

School Name _____ Year _____ - _____

Does your child have any siblings? If so, how old are they and what schools do they attend?

Child's name _____ Age _____

Current School _____ Grade _____

Child's name _____ Age _____

Current School _____ Grade _____

4 Do you attend Mass? _____

In what Parish are you registered? _____

Do you use Sunday envelopes? _____ Envelope Number _____

Does your child attend Mass with you? _____

Do you pray with your child? Daily _____ Weekly _____ Occasionally _____

5 What was your child's first language? _____

What language does your child use most frequently at home? _____

What language do adults in the home most often speak? _____

6 Please explain your child's living situation. (Parents, Step-Parents, Guardian, etc.)
