



HOLY MARTYRS A.R.S. ASHKHEN PILAVJIAN PRESCHOOL

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HELP US LEARN MORE ABOUT YOUR CHILD! **Parent Questionnaire** 2017- 2018 Program Year

Child's Name: _____

Group: _____

Dear Parents,

In order to plan classroom activities more effectively for your child, to have a greater learning experience and to broaden parent teacher communication, we need to learn more about your child and your family beliefs.

1. Please, tell us about your child's interests and activities/play he/she prefers to do at home.

2. Please tell us about your family's religion and culture: _____

3. To help your child grow and learn more effectively, please tell us about your family beliefs in child rearing practices. Family structure and development. _____

4. What do you see as your child's strengths? _____

5. What else would you like us to know about your child? (i.e., special needs, health, nutrition or developmental concerns, etc.) _____

6. Based on the school philosophy (refer to Parent Information & Policy Handbook), what are your educational goals for your child while enrolled at Pilavjian preschool _____

7. In order to work more effectively with your child, please provide us with suggestions or techniques that could be used by the classroom teacher. _____

8. Parent participation is an integral part of our program. Therefore, please let us know how you would like to be involved / participate in overall school activities.

9. As part of the parent education program, the school organizes several parent workshops. Please help us by suggesting topics that you find interesting for these parent trainings.

Name of the parent completing this form: _____

Date: _____

Signature: _____

If more space is needed, please attach a separate sheet.