

Questionnaire for Classroom Teacher or Principal

The following student has registered for St. Eugene School, 7600 N. Port Washington Rd., Fox Point, WI. In order to best serve the incoming student we appreciate learning more about his/her academic performance and learner behaviors. Thank you for taking the time to complete this questionnaire.

Student:	Grade:	
Current School:		
Parent Signature for consent to sh	nare information:	
Name of person completing form	:	
Position:	Date:	
Academics What are the student's academic s	strengths?	
Are there any academic concerns	? If so, please explain:	
What instructional strategies have	e worked for this student?	
Does this child have any learning	accommodations? If yes, please describe:	
	organization skills, classroom behavior, etc.) relating to his/her learner behaviors?	
Are there concerns related to lear	ner behaviors? If so, please explain:	
What motivational strategies have	e worked for this student?	

Please return completed form to: Rebecca Jones, Principal, St. Eugene School, 7600 N. Port Washington Rd., Fox Point, WI, 53217 fax: 414-918-1122, email: jonesreb@steugene.school

