

SPG

Out of School Society



Personality Survey Child(ren) named: _____

1. My child's personality and temperament:

2. Activities my child enjoys:

3. How my child plays with other children:

4. Recent changes I have seen in my child:

5. My child communicates by:

6. The most challenging aspect of raising my child:

7. Specific areas where I would like my child to experience growth:

8. I would like to add:

Parent signature: _____ Print name: _____

Signature of person receiving information: _____ Date: _____