



TUAKAU COLLEGE

PARENT INFORMATION

(Information provided here assists teachers to better meet your child's needs)

STUDENT NAME: _____

YEAR: _____

Form completed by: _____ Relationship: Mother Father Grandparent Caregiver

My child's areas of strength: intellectual, creative, social or physical
(e.g. maths, literacy, computers, music, drama, sports, cultural, leadership)

My child would benefit from support in:

At home my child.....	Always	Frequently	Sometimes	Not Yet
Enjoys learning				
Is curious, asks questions, is observant				
Learns things quickly; good memory				
Has extensive vocabulary				
Is passionate about one or more areas of interest				
Is self confident/social/outgoing				
Has personal sensitivity/compassionate				
Vivid imagination/highly creative				
Is reliable/responsible for age				
Has a sense of humour				
Well organised, plans/uses time well				
Sticks with tasks until completed				
Write stories/poems at home				
Organises games and activities for others				
Enjoys reading				
Can concentrate intently on an activity for sustained periods of time				
Constructs models, charts, craft in spare time				
Sets and strives to maintain personal high standards				

OUT OF SCHOOL ACTIVITIES

SPORTS:

MUSIC & ARTS:

CLUBS:

SPECIAL TUITION: