



St. James' Preschool



ALL ABOUT: _____

Child's Name: _____

Birthdate: _____

THINGS MY CHILD DOES WELL:

WHAT MY CHILD LIKES AND DISLIKES:

THINGS I AM WORKING ON WITH MY CHILD:

MY CHILD ENJOYS THESE ACTIVITIES:

MY CHILD HAS DIFFICULTY WITH THESE ACTIVITIES:

THINGS MY CHILD MIGHT NEED HELP WITH:

Additional comments about my child:

Date: _____