

Student Information Sheet

Ms. Gately

2019-2020

Full Name: _____

Preferred name or nickname: _____

Preferred pronoun (circle one): He/him She/her They/them Other: _____

Pronoun usage (circle one): Known by everyone or Only known by some (who?): _____

Birthday: _____ Current age: _____

Allergies: _____

Language(s) spoken at home: _____ Can your parents speak English? _____

Favorite subject(s) in school: _____

Least favorite subject(s) in school: _____

After school commitments & days/times: _____

Favorite food(s): _____

Favorite animal(s): _____

Circle ALL activities that you enjoy:

Drawing Singing Playing sports Watching sports Working

Painting Acting Playing video games Reading Dancing

Writing Other: _____

Who do you live with at home (animals included)? List ages of any children in home.

What do you want me to know about you? 😊 _____
