## First Name Class Surname My child's Favourite Things: favourite colour: favourite characters: favourite food: favourite expression: favourite book: favourite TV show: favourite game(s): other favourites: My child likes to: ☐ Listen to stories ☐ Listen to music ☐ Draw and colour □ Read stories ☐ Play alone ☐ Construction play, making things ☐ Play with other children ☐ Sing ☐ Play outside ☐ Investigate & ask questions **GETTING TO KNOW MY CHILD** ☐ Play quiet games inside □ Dancing ☐ Go to a friend's house Other: (Please specify) ☐ Play sport ☐ Go to museums My child doesn't like to: My child is good at: My child learns best when: At the moment my child is learning to:

A GUIDE FOR MY CHILD'S TEACHER