Student Survey #1
2022 Beginning Year - Getting to know you

The respondent’s email (null) was recorded on submission of this form.
* Required

1. Email *

2. 1. Who do you live with? Who do you spend the most time with? Who helps you when you are not at school? *

3. 2. What do you like doing when you are not in school? Where do you do this activity? Who do you do this activity with? *

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4. 3. What is your community like? What places do you go outside of your home? *
   What do you do there?

5. 4. What are your hopes and dreams for life? Who do you look up to? *

6. 5. What are your hopes and dreams for this school year? *

7. 6. What are you good at? Please include things you know from outside of school. *
8. 7. What are you hoping to learn or get better at outside of school? *


9. 8. What groups do you identify with? Please share which racial, ethnic, religious or other groups you feel a part of.


10. 9. What languages do you speak? *


11. 10. What else would you like your teacher to know about you? *


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