| First Name | Last Name | Birthday: Date | _Month |
|------------|-----------|----------------|--------|
|------------|-----------|----------------|--------|

- 1. What would you like for me to know about you as your teacher?
- 2. How many years have you attended our school? If this is your first year, where did you go to school last year?
- 3. What would you like to know about your teacher?
- 4. If you could live anywhere in the world, where would you live and why?
- 5. What do you see yourself doing at age 30?

- 6. How do you think this school year will be different from last year?
- 7. What is your favorite:

| Restaurant? | |
|-------------|--|
| | |

| TV show? |
|----------|
|----------|

| Movie? | |
|--------|--|
|--------|--|

| Song? | | | | | | | |
|-------|--|--|--|--|--|--|--|
| | | | | | | | |

| School Subject? _ | |
|-------------------|--|
|-------------------|--|

Created by Crystal Frommert