

ALL ABOUT

My Signature: _____

This is me: _____

MY FAVORITES

Color: _____

Movie: _____

Food: _____

Band/Song: _____

Holiday: _____

Place to visit: _____

Game: _____

Today's Date: _____

FIRST DAY OF Kindergarten

My Signature: _____

This is me: _____

MY FAVORITES

Color: _____

Movie: _____

Food: _____

Band/Song: _____

Holiday: _____

Place to visit: _____

Game: _____

Today's Date: _____

I am years old

When I grow up, I want to be: _____

LAST DAY OF Second Grade

My Signature: _____

This is me: _____

MY FAVORITES

Subject in school: _____

I am years old

Memories from this year: _____

My best friends: _____

Today's Date: _____

ALL ABOUT MY TEACHER

Dear _____

We are so excited to be in your class this year! Please help us get to know you better by filling out this form and sending it back home. Thanks!

Full Name: _____ Birthday: _____

MY FAVORITES

Place to Eat: _____ Drink: _____

Place to Shop: _____ Color: _____

Hobbies: _____ Flower: _____

Food: _____ Scent: _____

Snack: _____ Team: _____

MY CLASSROOM WISH LIST

Don't need _____ Allergies _____