## St. Mary School Prospective Family/Student Questionnaire

Student Name(s):	Grade(s):
How did you hear about St. Mary School?	
Present/last school attended	StateZip
Present/last teacher	
Grade level M F Grade level	M F Grade level M F
Student lives with (check all that apply)	
Father Mother Brother/s (how many)	Sister/s (how many) Other/s
Language spoken at home: English Sp	panish Other
<b>Religion:</b> Catholic Christian (please indicate	e denomination) Other
Parent E-mail(s):	
Does your child receive any of the services listed below	w? (Check any and all that apply)
IEP 504 Behavior Plan Tit	tle I (Math or Reading)
Speech Counseling OP/PT	
Does your student have any diagnosed learning needs	??
ADD ADHD Autism Spectrum For	etal Alcohol Syndrome Physical Disabilities
Are there any other medical or learning concerns we	should be aware of?

What are some of your child/children's interests?	
What does/did the present/former school do well?	
Why are you dissatisfied with the present/former school?	
What are your expectations for your child/children?	
What are your expectations from St. Mary School?	
Do you have any other comments or concerns?	

Thank you for this information and welcome to the St. Mary School community.

If you have any questions, please feel free to reach the office at Office@saintmaryschool.org

or at (360) 532-1230.