



**HAMPTON ACADEMY**  
**Grade 1 - 12 HELPFUL INFO ABOUT YOUR CHILD**

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent(s) Name(s) \_\_\_\_\_

Does your child have a nickname?    If so what is it: \_\_\_\_\_

What is the primary language spoken in your home? \_\_\_\_\_

What does your child like to eat? \_\_\_\_\_

Does your child have any allergies? \_\_\_\_\_

Does your child have any fears? \_\_\_\_\_

How does your child deal with anger and frustration? \_\_\_\_\_

How does your child like to be comforted when upset? \_\_\_\_\_

What are your child's strengths? \_\_\_\_\_

What are your child's weaknesses? \_\_\_\_\_

What are your major concerns with your child? \_\_\_\_\_

What reward system do you use at home?  
\_\_\_\_\_

What discipline methods do you use at home? \_\_\_\_\_

What is most important for you to know via parent/teacher communication? \_\_\_\_\_  
\_\_\_\_\_

What are your expectations for your child's experience while at the Hampton Academy? \_\_\_\_\_  
\_\_\_\_\_