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? ** ** ** ** ** ** ** ** **

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. *

7. What are you hoping to learn or get better at outside of school? *
8. What groups do you identify with? Please share which racial, ethnic, religious or other groups you feel a part of.
9. What languages do you speak? *
10. What else would you like your teacher to know about you? *

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