Getting to Know Your Child Questionnaire		
Your child's name: Age: Day School:	Level at Lamdeni: ————————————————————————————————————	למדני Lamdeni learn it. live it. love it.
ne IMPORTANT thing for you to	o know about my child is:	
B words that describe your child and his/her personality:	What motivates your child:	
2. 3.	My child's strengths include:	
ly child's favourite activities are:		
What are 3 hopes / goals you have your child's year at Lamdeni: 1.	for What kind of things	upset child:
2.		

Thank you for taking the time to provide us with this important information. It will assist us in ensuring a successful & enjoyable experience for your child at Lamdeni.

3.

Have you shared these hopes with your

child's year at Lamdeni: YES / NO

Your recommendations for

Lamdeni: