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| **logo_kolorowe** | poledu@yahoo.com[www.PolskaSzkola.weebly.com](http://www.PolskaSzkolawAnnArbor.weebly.com) 215 Alexander Music BuildingEastern Michigan UniversityYpsilanti, MI, 48197 |

**Questionnaire**

**Polska Szkoła w Ann Arbor – Polish Language Center of Ann Arbor**

**Personal Information**

1. Child’s Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Parents’ Names / Legal Guardian’s Name:
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Telephone & E-mail Contact Information:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Persons Authorized to Pick up Child:
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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6. Health Problems:
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7. Allergies / Dietary Restrictions:

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8. School or Daycare the Child Attends?

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9. Any holidays, festivities from which you would prefer your child to be exempt? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Abilities / Behavior / Habits**

9. Linguistic Level:

comprehension speaking

 beginner / advanced beginner / advanced

English \_\_\_ \_\_\_ \_\_\_ \_\_\_

Polish \_\_\_ \_\_\_ \_\_\_ \_\_\_

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_

10. What are your child’s favorite stories/books/movies/songs (in any language)?

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11. What are your child’s favorite activities (music, art, dance, games, toys, etc.)?

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12. What are your child’s strengths?

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13. In what situations does your child have difficulties?

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14. Does your child have any fears?

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15. How do you set limits for your child?

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16. Any requests or wishes you may have:
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**Helping out with the School:**

17. Would anyone in your family be able to help with the Polish School In Ann Arbor? Y\_\_ N\_\_

\*with the children: i.e. teaching, playing a musical instrument, physical education, art, etc.

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\*with the school’s administration: i.e. legal issues, accounting, advertising, pedagogy, lesson preparation, clearing, etc.

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**Signature of Parent**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_