STUDENT PROFILE

Name: _____ Grade: _____

Your Cell Phone #: _____

Your Email: _____

EXTRA CURRICULAR ACTIVITIES:
Fall:

Winter:

Spring:

Summer:

1. List 3 things a teacher has done in the past that has helped you learn.
   A.
   B.
   C.

2. List 3 things a teacher has done in the past that has hindered your learning.
   A.
   B.
   C.

3. Is there anything else I need to know about you to help you learn? Do you have any special needs (this is confidential)?

4. What is your anticipated, achievable grade for this class? Why do you think that is achievable?

5. What would you like to learn during this quarter?