

Small Group Questionnaire

NAME: _____ Teacher: _____ Date: _____

The people I live with are:
My favorite thing about school is:
My LEAST favorite thing about school is:
Something I wish I could change about myself is:
One thing I like about my teacher:
One thing nice my teacher would say about me:
In class I feel happy when:
If I had 10 minutes of free time in class I would:
The nicest thing that has ever happened to me in class is:
I like it when the teacher says:
The teacher/staff member I would like to have lunch with is:
I get in trouble every day YES NO SOMETIMES
I'm a good listener YES NO SOMETIMES
I sometimes need help in class but I don't ask because:
If I had 2 wishes they would be:
Something I would change at home:
I wish my parents/guardians: