



ST. GABRIEL'S CATHOLIC SCHOOL
ENGAGING MINDS. INSPIRING VIRTUE.

PARENT PERSPECTIVE FORM

Applicant Name _____ Applying for Grade _____

Please answer the questions as completely as possible in the space provided or on an attached sheet of paper. We appreciate your effort in trying to help us get to know your child better.

Please briefly describe your child's current preschool or school program and comment on your child's experience in that program (if applicable).

Please tell us about your child's characteristics, personality, and maturity so we may have a clear picture of how you view him or her.

Please tell us about your child's talents, accomplishments, challenges, extra-curricular interests, etc.

Please share with us any factors that have had an impact on your child's academic or social progress (examples: health concerns, learning challenges, and changes in home, school, or family situation).



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How do you view your role in your child's education?

How might St. Gabriel's be a good match for your child and family?

What are your expectations for your child's experience at St. Gabriel's?

Please share any additional comments that might allow us to get to know your child.

Parent Name (please print): _____

Parent Signature: _____ Date: _____