

girl scouts of ne kansas Girl Info Sheet

Girl Scout's Name:
Out the Leavel
Grade Level:
Parent/Caregiver Name(s):
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Parent/Caregiver Name(s):

nw missouri	Parent/Caregiver Name(s):	
1. What makes your child feel happy? Does she have any special talents that she likes to show off?		
2. If your child had an hour of free time, how would they most likely use that time?		
3. Does your child have any developmental delays or disabilit	ies? How can we accommodate these?	
4. How does your child communicate stress or frustration at do to manage negative behaviors? Any additional advice on l		
5. What is the most important thing I should know about your child?		
Any other concerns or comments that you would like to share about your child?		