

Parental Questionnaire

Parent's/Guardian's Full Name _____	Account No. _____
Address _____	
E-Mail Address _____	Phone _____

1. **PERSONAL INFORMATION:**

YOU

YOUR SPOUSE (if applicable)

Name/Relationship to child _____

Educational background _____

Occupation _____

Religious affiliation _____

2. What home-schooling resources have you read this year for your own parent/teacher growth?

3. Do you have a computer? Yes No If so, which type? _____

CD-ROM? Yes No Access to the Internet? Yes No

4. Please check the educational methods you prefer:

Christian liberal arts hands-on classical
 traditional unit studies workbooks _____

5. Do we have your permission to share your ideas, projects, or schedules with other homeschoolers?

Yes No

6. If you are a first-time enrollee, what influenced your decision to enroll with Hewitt? Curr. Fair

Internet friend's recommendation ad/flyer books other _____

7. How many years have you homeschooled? _____

8. If this is not your first year, how did you feel about this past year of homeschooling and your ability to homeschool in general? _____

9. Who will be the principal teacher? _____ For all subjects? _____

(PLEASE COMPLETE REVERSE SIDE)

10. Please check the following areas you consider to be your own strengths in the first column of boxes. Check spouse's (if applicable) strengths in the second column of boxes:

- | | | | | | |
|--------------------------|-----------------------------------|--------------------------|---|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> Bible | <input type="checkbox"/> | <input type="checkbox"/> literature | <input type="checkbox"/> | <input type="checkbox"/> science |
| <input type="checkbox"/> | <input type="checkbox"/> history | <input type="checkbox"/> | <input type="checkbox"/> writing | <input type="checkbox"/> | <input type="checkbox"/> second language |
| <input type="checkbox"/> | <input type="checkbox"/> reading | <input type="checkbox"/> | <input type="checkbox"/> math including algebra | <input type="checkbox"/> | <input type="checkbox"/> critical thinking |
| <input type="checkbox"/> | <input type="checkbox"/> spelling | <input type="checkbox"/> | <input type="checkbox"/> problem solving | <input type="checkbox"/> | <input type="checkbox"/> fine arts |
| <input type="checkbox"/> | <input type="checkbox"/> grammar | | | <input type="checkbox"/> | <input type="checkbox"/> organization |

11. Do you have other mandatory duties that make demands on your time? _____ If yes, how many hours per week? _____ Are your children with you at this time? _____

List all children in the family from oldest to youngest:			
Name _____	<input type="checkbox"/> M	<input type="checkbox"/> F	Age _____
Name _____	<input type="checkbox"/> M	<input type="checkbox"/> F	Age _____
Name _____	<input type="checkbox"/> M	<input type="checkbox"/> F	Age _____
Name _____	<input type="checkbox"/> M	<input type="checkbox"/> F	Age _____
Name _____	<input type="checkbox"/> M	<input type="checkbox"/> F	Age _____
Name _____	<input type="checkbox"/> M	<input type="checkbox"/> F	Age _____

12. In general, how do your students relate to one another? _____
to peers? _____ to adults? _____

13. List your plans and goals for this year of homeschooling and/or other helpful information such as your reasons for homeschooling (if there's not enough space for your answer, feel free to use another sheet of paper):

Signature _____ Date _____



Hewitt Homeschooling Resources

P. O. Box 9 • Washougal, WA 98671-0009
Phone: (800) 348-1750 • FAX: (360) 835-8697
E-Mail: info@hewitthomeschooling.com