

Montessori Middle School

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STUDENT QUESTIONNAIRE

(PLEASE ATTACH ADDITIONAL SHEETS IF MORE ROOM REQUIRED)

Name _____ Age _____ Date _____

What did you like best about your previous school?

What did you like least about your previous school?

What are your strengths?

What are your weaknesses?

Describe something you are proud of accomplishing.

What would you like to learn about?

What is your favorite subject? Why?

Describe qualities you like in friends.

Describe qualities you like in teachers.

What kind of activities do you enjoy outside of school?

What is your favorite book? Why?

What is the most recent book you have read? _____

What is your favorite television program? Why?

Who are your heroes? Why?

If you could be like one of your heroes, who would you choose? Why?

What would you like to do that you have never done before?
