



## Middle School New Student Questionnaire

Please answer the questions below in your own handwriting.

Name\_\_\_\_\_

Birth

Date\_\_\_\_\_

School Currently

Attending\_\_\_\_\_

Current

Grade\_\_\_\_\_

Briefly describe the members of your family. What do you like to do together?

What talents or interests do you have? How do you pursue them?

Do you belong to any groups or organizations in or out of school? In what ways have you been an active member?

What do you like best about your present school?

What book have you read recently that you particularly enjoyed? What did you find special about it?

Why would you like to attend Ruffing Montessori School?