



Student Information Gathering Sheet

Teacher..... Student (optional).....

Date form completed

What is good about being in this class with this teacher?

What is the thing that you like best about this teacher?

If you could change one thing about the teacher what would that be?

Is there anything that I should know that I haven't asked about?

Is there anything that you would like to talk with me about rather than write on this sheet?

This form is confidential