Dear ________________

We are pleased to share our Getting To Know Me booklet with you. This booklet includes a lot of information about our child ____________ and our family. We hope that this information will help you to get to know our child and some of his/her interests, strengths and skills. If you have any questions, please call me at home ______________ or work _______________. The best time to reach me is ______________. I look forward to working with you this year. Please let us know how we can help make this a great school year.

Sincerely,

Down Syndrome Connection of the Bay Area
Encouraging the unlimited potential in children and young adults with Down syndrome
Here is my family

My name is
________________________________________________________________________________________

My Mom’s name is
________________________________________________________________________________________

My Dad’s name is
________________________________________________________________________________________

I have ______ brothers. Their names are:
________________________________________________________________________________________

I have ______ sisters. Their names are:
________________________________________________________________________________________

We have a pet. My pet’s name is ________________________

Other family members or friends that I want you to know about
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
Things I like to do

My favorite activity

My favorite color

When I go outside, I like to

MY favorite hobby or activities

Three things that motivate me are
Health Considerations

Here are some things that you may need to know about my health

Surgeries

________________________________________________________________________

Current Medication

________________________________________________________________________

Allergies

________________________________________________________________________

ATL X-ray Yes_______________ No _______________ Date ________________

I wear glasses _______ I wear a hearing aid ____________________

Other things you may need to know about my health

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
My Feelings

Things that make me feel happy


Things that might upset me


I feel sad when


I respond positively when


Things I may be a little afraid of


Places I like to go

Here are some places that I like to go with my family

___________________________________

___________________________________

___________________________________

___________________________________

My favorite place to go in my neighborhood is

___________________________________

___________________________________

___________________________________

___________________________________
Here are some things you may need to know about the best way for you to communicate with me.
Things I Do To Help at Home

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Things I can do for myself

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________


Things I would like to learn to do

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Thank you to the Down Syndrome Guild of Greater Kansas City for creating this document and sharing it.