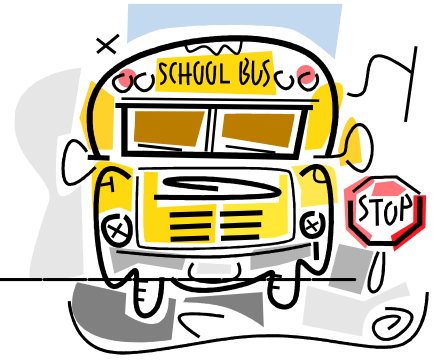


## SUGGESTED 2SD GRADE SUPPLIES

- 3 Glue sticks (NO liquid glue pens)
- 24 Pencils with erasers
- pencil case
- **3 boxes of tissues**
- 1 yellow highlight marker
- 2 Pens, non-erasable, for correcting papers
- 5 plastic folders with HORIZONTAL pockets (solid colors only - red, blue, green, yellow, orange)
- 5 BLACK composition marble copybooks 100 sheets
- One inch binder
- Markers - Crayola markers (non-scented)
- Scissors - "Fiskars for children" recommended
- Box of Crayola crayons or color pencils (no more than 24)
- 2 pink rectangular erasers
- 1 large schoolbag (large enough to fit a binder)
- Headphones (available at the dollar store) Please put in a Ziploc bag with students name clearly marked.
- 1 Package of Expo "fat" white board markers ... any colors and non scented, due to allergies
- Ziplock QUART size(students last name A-L), Ziplock GALLON size (students last name M-Z)

Please clearly and securely mark these items to prevent ownership disputes.

# Dismissal Plans for:



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(Student's Name)

Please tell how your child will be going home every day of the week (Right at School, Bus #, Walker).

**Please note:** If your child is not going home his/her usual way, I must receive a note stating this. I will NOT allow any child to go home differently than stated here unless a parent has notified me. Thanks for your cooperation with this!

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

# Email Listserv

If you would like to be on our class email listserv, please complete the information below and return to school asap. Please feel free to list more than one email address if you have multiple accounts. Thanks!

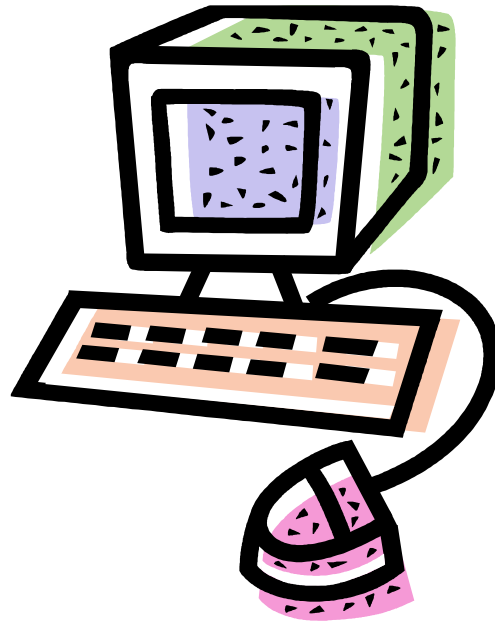
Student Name: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Email Address: \_\_\_\_\_



# **Parent Information Sheet**

Please complete the following and return to school as soon as possible.

Thank you!

Child's Name \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Occupation \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Occupation \_\_\_\_\_

Siblings at Cynwyd and their teachers:

Name \_\_\_\_\_

Teacher \_\_\_\_\_

Name \_\_\_\_\_

Teacher \_\_\_\_\_

What do you see as your child's strengths?

What are your child's interests?

Over --->

Please tell me about your child's experience in 1<sup>st</sup> grade. Did s/he attend Cynwyd? Were there any academic, behavioral or social challenges? If so, were there any particular strategies you found especially useful?

Is there anything else you'd like me to know about your child?

Thank you so much for completing this form! It will help me get to know your child better and will lead to a better year!