

First Baptist Church of Plano
Special Friends Sunday School

Led by: Susan Whigham M.Ed, M.S., CCC/SLP and Rose Henke B.S., M.A.

Family Information Form

Family

Parent's Name: _____

Child's Name: _____ Date of Birth: _____

Medical Diagnosis (if any): _____

Siblings: _____

Classroom

Favorite Toys: _____

Favorite Activities: _____

Likes: _____

Dislikes: _____

Education and Therapy

School Child Attends: _____ Grade Level: _____

Therapies your child is receiving:

Please share any information that will help us work with your child.

Please share any goals you may have for your child.
