

# Class of 2025 - Student Profile Parent Questionnaire

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

Parent 1 Name & e-mail: \_\_\_\_\_

Parent 2 Name & e-mail: \_\_\_\_\_

***As we get to know your child during the college guidance process, it is always helpful to have parent feedback. Please answer the questions as best as you can and use specific anecdotes whenever possible. You may either print it out and send the paper version in, or e-mail it to [tgallen@solebury.org](mailto:tgallen@solebury.org) by February 23. Thank you!***

1. If there are any specific colleges you would like your child to consider please list them below. Please indicate/describe to me the criteria (academic program offered, size, location, etc.) these schools currently meet to be considered. Is there an alumni/legacy affiliation with any of these schools?

2. We are proud of our child because...

3. My child's greatest strength is:

4. My child's greatest area to improve is:

5. Regarding your child's development, please describe at least one major event that you view as pivotal or a turning point, and tell me why.

6. My child's most positive experience in high school has been:

7. My child's most negative experience in high school has been:

8. Please tell me about any challenges or obstacles that your child overcame. This may have occurred inside or outside of school.

9. What 3 words or phrases best describe your child?

10. Please indicate to me anything you wish to add such as a special medical condition/history, family situation, financing concerns, interests outside of school that Solebury staff may have little knowledge of, etc.

11. Does your child have a learning difference or medical condition that warrants special academic accommodations? If so, do we have permission to discuss it in his/her letter of recommendation?

12. Is there anything else that you feel is important for the College Guidance Office to know that this questionnaire may have missed?