“LIFE SO FAR”

**STUDENT’S NAME:**

Insert Photo in box

# PLEASE RETURN THIS FORM AS AN ATTACHEMENT VIA REPLY EMAIL

**TO:** Tamrah.Bartlett@education.wa.edu.au

**PLEASE GLUE**

**PHOTO SPACE**

One copy will be retained in student services, a copy will be

kept by the principal and one given to your son or daughter’s mentor teacher.

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| 1. Education History (include any learning difficulties or diagnosed learning disabilities)
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| 1. Family History/Matters
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| 1. Personality (Strengths and areas of weakness)
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| 1. Physical and Mental Health
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| 1. Past achievements and future aspirations
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| 1. Additional Comments
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