

All About Me
FIRST DAY
OF SCHOOL

NAME: _____

AGE: _____

TEACHER: _____

SCHOOL: _____

HEIGHT: _____

WEIGHT: _____

SHOE SIZE: _____

WHEN I GROW UP I WANT TO:

MY FAVORITES:

COLOR: _____

FOOD: _____

ACTIVITY: _____

BOOK: _____

SUBJECT: _____

TV SHOW: _____

MOVIE: _____