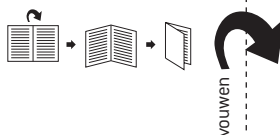


Kijklijst voor het oudercontact



Binnenkort oudercontact? Vul dan deze kijklijst over je kind in en neem hem mee naar het oudercontact. Ziet de leraar hetzelfde? Stof voor een boeiend gesprek?

Deze vijf woorden passen bij (naam van je kind invullen)

- | | | | |
|---|---|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> teruggetrokken | <input type="checkbox"/> spontaan | <input type="checkbox"/> opgewekt | <input type="checkbox"/> somber |
| <input type="checkbox"/> makkelijk | <input type="checkbox"/> vermoeiend | <input type="checkbox"/> ontspannen | <input type="checkbox"/> gespannen |
| <input type="checkbox"/> open | <input type="checkbox"/> stil | <input type="checkbox"/> levendig | <input type="checkbox"/> passief |
| <input type="checkbox"/> onzeker | <input type="checkbox"/> jaloers | <input type="checkbox"/> rustig | <input type="checkbox"/> lawaaierig |
| <input type="checkbox"/> overactief | <input type="checkbox"/> ondernemend | <input type="checkbox"/> driftig | <input type="checkbox"/> geduldig |
| <input type="checkbox"/> agressief | <input type="checkbox"/> ongeïnteresseerd | <input type="checkbox"/> nieuwsgierig | <input type="checkbox"/> ... |

Zo zie ik (naam van je kind invullen)

- | | | | |
|---------------------------------------|-----------------------------|-------------------------------|-------------------------------|
| heeft plezier in het leven | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| is zeker van zichzelf | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| is snel bang | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| komt goed voor zichzelf op | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| toont spontaan emoties | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| vertelt graag over ervaringen | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| gaat met plezier naar school | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| vraagt hulp als dat nodig is | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| speelt met andere kinderen | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| heeft vaak ruzie | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| helpt andere leerlingen | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| is fit en gezond | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| werkt of speelt geconcentreerd | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| is vlug afgeleid | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| is vlug ontmoedigd als iets niet lukt | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| kan zelf een tijd met iets bezig zijn | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| verveelt zich vlug | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |
| maakt af waar hij/zij aan begonnen is | <input type="checkbox"/> ja | <input type="checkbox"/> neen | <input type="checkbox"/> soms |

Checklist for the parent-teacher meeting

Do you have a parent-teacher meeting coming up soon? Then fill in this checklist concerning your child and bring it with you to the meeting. Does the teacher see your child the same way as you do? This is material for a fascinating conversation!

These five words describe (fill in your child's name)

- | | | | |
|---------------------------------------|---------------------------------------|---|----------------------------------|
| <input type="checkbox"/> withdrawn | <input type="checkbox"/> outgoing | <input type="checkbox"/> alert | <input type="checkbox"/> gloomy |
| <input type="checkbox"/> easy-going | <input type="checkbox"/> tiresome | <input type="checkbox"/> relaxed | <input type="checkbox"/> tense |
| <input type="checkbox"/> open | <input type="checkbox"/> quiet | <input type="checkbox"/> lively | <input type="checkbox"/> passive |
| <input type="checkbox"/> insecure | <input type="checkbox"/> jealous | <input type="checkbox"/> calm | <input type="checkbox"/> noisy |
| <input type="checkbox"/> hyper-active | <input type="checkbox"/> enterprising | <input type="checkbox"/> short-tempered | <input type="checkbox"/> patient |
| <input type="checkbox"/> aggressive | <input type="checkbox"/> uninterested | <input type="checkbox"/> curious | <input type="checkbox"/> ... |

This is how I see (fill in your child's name)

- | | | | |
|---|------------------------------|-----------------------------|------------------------------------|
| enjoys life | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| is self-confident | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| is easily afraid | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| defends him/herself | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| shows emotions spontaneously | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| likes to talk about experiences | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| likes to go to school | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| asks for help when needed | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| plays with other children | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| often gets into rows | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| helps other students | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| is fit and healthy | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| is concentrated when working or playing | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| is easily distracted | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| is easily discouraged if unsuccessful | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| can keep him/herself occupied | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| gets bored quickly | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |
| finishes what he/she started | <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> sometimes |