

Last Day of

KINDERGARTEN

I am _____ Years OLD MY SCHOOL: _____

MY Teacher: _____

WHEN I GROW UP, I WANT TO BE a:

I AM MOST EXCITED ABOUT:

MY FAVORITES

COLOR: _____

BOOK: _____

PLACE TO GO: _____

MOVIE: _____

SONG: _____

FOOD: _____

INDOOR ACTIVITY: _____

OUTDOOR ACTIVITY: _____

INSERT PICTURE HERE

TODAY'S Date:
