# How well do you know your new classmates?

## QUESTIONNAIRE

### YOUR NAME

1. What's your name?
2. What does your name mean?
3. Do you have a middle name?
4. Are you named after someone?
5. Do you like your name?

### LIFESTYLE

1. Are you a full-time student?
   a. *If yes:* What's your major?
   b. *If no:* What do you do for a living?
2. How do you get to work or class?
3. How long does it take?

### HOME AND FAMILY

1. Where do you live?
2. Do you like your neighborhood?
3. Do you live alone or with your family?
4. Do you have any brothers or sisters?
5. Where are your parents from?

### FRIENDS

1. Do you have a lot of friends?
2. Are your friends from school, work, or your neighborhood?
3. What are your friends like?
4. Do you and your friends get together a lot?
5. What do you do when you get together?

LIVEWORKSHEETS