



ENROLMENT INFORMATION

English Language Learners

(to be completed when enrolling children from non-English speaking backgrounds)

Child's name:

Date of Birth: / /

Child's country of birth:

Date of child's arrival in New Zealand: / /

Birth place of parents: (Mother)

..... (Father)

Nationality of child (as stated by parents):

Particular ethnic group:

First language spoken at home:

Second Language spoken at home:

Can your child speak/read/write in the first language?

Speak Yes/No **Read** Yes/No **Write** Yes/No

Can your child speak/read/write in the second language?

Speak Yes/No **Read** Yes/No **Write** Yes/No

Other languages spoken by your child:

Level of facility in English (Tick one)

- a) Very little English ()
- b) Speaks Basic English only ()
- c) Can speak English ()
- d) Speaks English, some ability in reading/writing ()
- e) Capable of speaking, reading, and writing in English ()

Attach any other relevant language learning about your child

Parent/Caregiver:

Sign and date: