

Pre-Admission Questionnaire (Primary School)			
1. Name of the child			
2. Date of birth			
3. Grade applying for	DS _____ / ES _____		
4. Current grade			
5. What is your child's first language?	German ____ English ____ Japanese ____ Others: _____		
6. Which language does the mother use when speaking to the child?			
7. Which language does the child use when speaking to the mother?			
8. Which language does the father use when speaking to the child?			
9. Which language does the child use when speaking to the father?			
10. Which language does the child use when speaking to siblings?			
11. What is the family language? (e.g. the language used by everyone during meal time)			
12. Where has your child lived?	City/Country	from	to
13. Has your child had previous schooling?	Yes ____ No ____		
14. Please name the last three schools including nursery/ kindergarten/early learning center.	Name of institution	from	to

15. Has your child repeated a grade?	Yes _____ (Grade _____) No _____
16. Has your child skipped a grade?	Yes _____ (Grade _____) No _____
17. Does your child have siblings?	Yes ___ No ___
18. How many siblings does your child have?	
19. Is your child a) the oldest child b) a middle child c) the youngest child? Please circle where applicable.	
20. Excepting parents and siblings, are there any other important persons in the life of your child? Please explain.	
21. Whom does your child prefer to interact with? Please circle where applicable.	a) My child prefers to interact with other children. b) My child prefers to interact with adults. c) My child prefers to learn or play by herself/himself.
22. What are your child's strengths?	
23. What are your child's weaknesses?	
24. Has your child experienced an important event such as divorce, accident, death of a loved one etc.?	
25. Does your child have any Allergies?	Yes ___ No ___ Medication ___ If yes, please give details:

Mobile: _____ Email: _____

Additional information
