



## Elementary School Student Development Form (Early Childhood to Grade 5) SY 2009-2010

Student's Name: \_\_\_\_\_  
last (family) first (given) middle

Date of Birth: \_\_\_\_\_ Anticipated Grade of Entry: \_\_\_\_\_  
day/month/year

Your child's development and school progress is important to us. Please share it by completing this questionnaire. The responses on this questionnaire will remain confidential and will be viewed only by the school personnel who require this information in order to address your child's educational needs.

### 1. FAMILY HISTORY

Name of Parent(s): \_\_\_\_\_

Name of Guardian(s) and Relationship to Family: \_\_\_\_\_

Student will be living in Tanzania with:

- Father
- Step-Father
- Guardian

- Mother
- Step-Mother
- Other

Name of brothers and/or sisters	Age	Grade (if applicable)	Name and Location of Present School
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### 2. LANGUAGE HISTORY

If English is not the child's first/mother language, has the child had instruction in or experience of English?

Yes: \_\_\_\_\_ No: \_\_\_\_\_ If 'Yes' in what situation? \_\_\_\_\_

For how long? \_\_\_\_\_

1. Which languages are spoken in your home? \_\_\_\_\_
2. Which language is used most frequently in your home? \_\_\_\_\_
3. Which language did your child first learn to speak? \_\_\_\_\_
4. Which language does mother speak to child? \_\_\_\_\_
5. Which language does father speak to child? \_\_\_\_\_
6. Which language does your child use to communicate at home?
  - a) With mother? \_\_\_\_\_
  - b) With father? \_\_\_\_\_
  - c) With siblings? \_\_\_\_\_



7. Are there other individuals responsible for caring for your child?

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Language(s) spoken: \_\_\_\_\_ Language(s) understood: \_\_\_\_\_

8. Do you (the child's parents/guardians) speak English? Yes: \_\_\_\_\_ No: \_\_\_\_\_

9. To what level? Beginner: \_\_\_\_\_ Intermediate: \_\_\_\_\_ Fluent: \_\_\_\_\_

10. Has your child been enrolled in any type of Special Education Programme? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If 'Yes' please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**3. SCHOOL HISTORY (Please answer in full or write Non-Applicable - N/A)**

Most recent school attended:

School Name: \_\_\_\_\_

Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

**Signatures:**

*Families are reminded of the following IST rules and regulations as listed in the Student Handbook: (1) All students wear a uniform consisting of a white IST Polo shirt (available for purchase at IST) and navy blue shorts, pants or skirt; (2) Students must abide by a technology code of conduct.*

\_\_\_\_\_  
Signature/Persons who completed this form\*

\_\_\_\_\_  
Date

\* Note: I/We have completed and signed this questionnaire in the belief that all answers are as accurate as possible.

