

ESOL Supplementary Enrolment Form

**** Only complete this form if English is your child's second language ****

Please help us to learn more about your child and family by filling in this form to accompany our regular enrolment form. We hope that by having this information we can better cater for your child.

Family Name	_____	First Name	_____
Name to be used at school	_____	Boy / Girl	_____
Home Address	_____	Place in family	_____ of _____
Telephone	_____	Ethnic Group	_____
Date of Birth	_____	Home Languages	_____
Country of Birth	_____	Religion	_____ (optional)
Last Country of Residence	_____	Date of Arrival in NZ	_____

Previous Education in your Country Pre School / Primary

Name of School	Place	Length of Time	Age	Language Used

Previous Education in New Zealand

Name of School	Place	Length of Time	Age

Can he / she **read** in his / her own language?

Not at all ☐ A little ☐ Fluently ☐

Can he / she **write** in his / her own language?

Not at all ☐ A little ☐ Fluently ☐

Has your child learnt **English** before arrival?

Yes ☐ No ☐

If yes, where has he / she learnt **English**?

School ☐ Home ☐ Private Tutor ☐ Language School ☐

How long has he / she learnt **English**?

Years _____ Months _____ Hours per week _____

Parents

Ethnic Origin: Mother _____ Father _____

Country of Birth: Mother _____ Father _____

Occupation in your Country: Mother _____ Father _____

Occupation in New Zealand: Mother _____ Father _____

Will Father and Mother be living in New Zealand?

Father: Yes ☐ No ☐

Mother: Yes ☐ No ☐

Other family living with you in New Zealand: _____

Language Child uses when speaking to: Mother _____

Father _____

Brothers / Sisters _____

Grandparents _____

Other Family _____

Can Mother speak English?

Not at all ☐ A little ☐ Fluently ☐

Can Mother read English?

Not at all ☐ A little ☐ Fluently ☐

Can Father speak English?

Not at all ☐ A little ☐ Fluently ☐

Can Father read English?

Not at all ☐ A little ☐ Fluently ☐

Who can we talk to or write to if we need to talk about your child?

Name: _____ Relationship to Child _____

Address: _____

Phone: _____

What hobbies or interests does your child have? _____

Can you tell us any more?
