



Confidential School Report Form (2 - 5 years old)

Please ask your current institution to send directly to the Deutsche Schule Kobe International

Student Name (First / Middle / Last)
Date of birth (Day / Month / Year)
Male / female
Nationality

Personal, social emotional					
	Unable to observe	Poor	Average	Good	Excellent
Relationship with peers					
Relationship with adults					
Honesty					
Open-mindedness					
Adaptability					
Self confidence					
Attentiveness					
Ability to take risks					
Shows consideration to others					
Respect for diversity					
Personal behaviour					
Ability to act independently					
Overall assessment					



Academic performance					
	Unable to observe	Poor	Average	Good	Excellent
Curiosity and motivation for learning					
Creative thinking					
Persistence					
Problem solving skills					
Communication skills					
Language development					
Fine motor skills					
Gross motor skills					

What support services, testing if any has the applicant received? Please check if previously or presently participated in any of the services listed.	
Gifted and talented	
Behaviour management	
Occupational therapy	
Speech/language therapy	
IEP/Learning support plan	
ESL support	
Special resource classroom	
Psychological evaluation	
Learning support	
Complicated medical history	
Other	
Please give details of any checked programmes	



What words come to mind to describe the applicant's strengths and next areas of growth?

What special talents or abilities does the applicant possess?

How does this student respond when they hit a point in their learning when they face a challenge?

Please describe the applicants language ability

Are the parents supportive of the school programme?

Do the parents engage well with the school community?

Name of person completing this form

Position

School name / address

Phone number / email address

Signature / Date