

# Australian International School

## Reference Request

For entry into the Lower Elementary School (Preparatory, Year 1 and Year 2)



Dear Teacher: The child listed below is applying for entry to the Australian International School. We appreciate your willingness to help us in our enrolments process by responding to the following questions. Your insight is invaluable and we thank you for your time and assistance.

**All information shared is considered confidential.**

Once completed, please sign and return this form in full to the Applications Department, [applications@ais.com.sg](mailto:applications@ais.com.sg)

Name of candidate: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Child's Mother Tongue: \_\_\_\_\_

Current preschool/school and year level: \_\_\_\_\_

Style of current program (full day/half day, days of attendance): \_\_\_\_\_

How long have you known this student? \_\_\_\_\_

### PRE-ACADEMIC/ACADEMIC SKILL DEVELOPMENT

		Exceeds age expectations	Age appropriate	Needs development	No basis for judgement
Intellectual curiosity		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Task completion and perseverance		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Language Development		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gross & Fine Motor Development		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Literacy Skills	Reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Numeracy Skills		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If applicable, please give details of the student's performance in any recent assessments (please provide name of assessment tool, result and date of assessment) e.g. Reading Age or Level, Spelling Age or Level, standardised Maths results, etc.

\_\_\_\_\_

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\_\_\_\_\_

1 Lorong Chuan, Singapore 556 818

T: +65 6664 8127

E: [enquiries@ais.com.sg](mailto:enquiries@ais.com.sg)

[www.ais.com.sg](http://www.ais.com.sg)



Australian International School is part of the global Cognita family of schools. [www.cognitaschools.com](http://www.cognitaschools.com)

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Are you aware of any specialist reports (e.g. Educational Psychologist, Speech or Occupational Therapy) that have been prepared on this student in the last two years? (Please note, we will ask parents to send us a copy of such a report.)

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Does the child display any particular strengths or talents?

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Has this child ever received any additional learning support, curriculum extension or enrichment or other specialist intervention? If so, please describe details.

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### SOCIAL AND EMOTIONAL DEVELOPMENT

	Excellent	Good	Average	Below Average	No basis for judgement
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to relate to peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential to lead	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please provide details of any specific educational, health, personal circumstances of the family or other needs of which we should be aware and level of support required in these areas? (E.g. Academic, EAL/ESL, emotional, social, speech, health, physical, counselling)

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If there are any further comments you may wish to make in support of this pupil's application or to give relevant information on his/her academic, physical, social or emotional needs, please note these below.

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Have there been any safeguarding/child protection concerns regarding this student?

YES

NO

Do you have additional information regarding this child that you would like to disclose by phone instead of writing?

YES

NO

May we contact you for further information?

YES

NO

Please complete, sign and return this form in full to the Applications Department, [applications@ais.com.sg](mailto:applications@ais.com.sg)

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Contact Tel. No: \_\_\_\_\_ Contact Email address: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

The school will collect, use, disclose and process "Personal data", for the purposes of safeguarding and promoting the welfare of your child, and where necessary, for the interests of the School and ensuring that all relevant legal obligations of the school and yourselves are complied with. You consent to such collection, use and disclosure of personal data for the purposes set out above and provided that at all times any collection, use or disclosure of personal data is done in accordance with the Personal Data Protection Act.

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