**Language background Information**

English as an Additional Language

Pupil’s name:…………………………………… Date of birth: …………………………….

Name used at home: ………………………… Date of Arrival in UK……………………

Country of Origin……………………………… Mother’s Country of Origin……………..

Father’s Country of Origin …………………… Interpreter needed - Child… Parents… (Y/N)

Adults collecting from school………………………………………………………………………

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| **Language(s) spoken at home:** |
| Child to father\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father to child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Child to mother \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mother to child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Child to siblings\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Siblings to child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Child to grandparents\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grandparents to child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Education:** (please include pre-school, nursery and any UK education) | | | | |
| Country | School | Date  (from –to) | Age  (from –to) | Languages of setting |
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| **Further Information** | | | |
| Are they able to go to the toilet independently? |  | | |
| **Does the child have difficulty in their home language?** | | |
| Following instructions (do they need to be repeated or broken down?) | |  |
| Answering questions | |  |
| Does he/she take a long time to respond? | |  |
| Does he/she struggle to talk about things e.g. what has happened at pre-school? | |  |
| Does he/she ‘search’ for words or call things by the wrong name? | |  |
| Was there any delay in beginning to speak in their home language? | |  |

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| **Other information:** | |
| Favourite activities at nursery |  |
| Interests and hobbies |  |
| Community classes attended (e.g. Qur’an classes) |  |
| Cultural/religious information regarding festivals or days of worship |  |
| Known medical conditions/dietary requirements |  |
| In which language do they watch TV? |  |