

11. Child's previous school history for past three years (if applicable):

School Name	Location	From To	System	Grades
<i>(Sample)</i> St. Mark's	Milan, Europe	Aug 2017 to June 2019	IB	Grade 6

12. May we contact your child's previous school for a behavior report?

- Yes
 No

13. Language of instruction at last school: _____

14. Child's first language: _____

15. Proficiency in English (circle as appropriate):

- a. Spoken English: fluent fair little none
b. Written English: fluent fair little none

16. If English is not your child's native language, how much formal instruction in the language has he/she had?

_____ Where? _____

17. At what age did your child begin formal schooling? _____

18. Has your child had any special or remedial help in the past; for example, remedial reading, math, special education, and so forth?

Yes ____ No ____ (If yes, please explain) _____

19. Has your child ever been diagnosed as having a learning disability? No ____ Yes (If yes, please explain below) ____

20. Does your child have any behavioral traits or special needs of which the teacher should be aware?

No ____ Yes (if yes, please explain) ____

21. Has your child ever had discipline problem that resulted in a detention or suspension (internal or external)?

Yes ____ (If yes, please explain below) No ____

22. Has this child ever been asked to withdraw from school? No ____ Yes ____ (If yes, please explain)

23. Does your child enjoy normal health? Yes _____ No _____
(If No, please provide complete background information. A completed NJIS Health Card must be submitted before a student can start classes)

24. As a parent or guardian of this student, I hereby consent to the use of photographs/videotape taken during the course of the school year for publicity, promotional and/or educational purposes (including publications, presentation or broadcast via newspaper, internet or other media sources). I do this with full knowledge and consent and waive all claims for compensation for use, or for damages.

_____ Yes, I give consent
_____ No, I do not give consent

Parent's Signature

Date