



PREVIOUS SCHOOL REFERENCE FORM

(To be filled out by Class Teacher / Principal)

Name of student:

Name of school:

Class / Grade:

How long has this student been at the above school?

What is the student's character?

Does this student have any learning difficulties that we should be aware of? If yes, please specify.

Does the student have any behavioural difficulties that we should be aware of? Please attach any records of behaviour issues.

Agencies involved (RTL, Sp Ed etc):

Has the student ever been stood down/suspended from your school? If yes, please give details.

Learning Information

Latest National Standard OTJ (Y1-8)

Please tick:

	Well below	Below	At	Above
Math				
Reading				
Writing				

Latest standardised assessment data (eg asTTle, PAT, STAR)

	Tool	Date	Result
Math			
Reading			
Writing			

Name of Class Teacher / Principal:

Signature:

Please mail direct to Excellere College, PO Box 4237, Kamo, Whangarei 0141
or fax to 09 435 0458, or email to office@excellerecollege.school.nz

Please include a copy of latest school report.