



Abu Dhabi Grammar School (Canada)
 PO Box 27161, Abu Dhabi, United Arab Emirates
 Tel: 02-644-4703, Fax: 02-645-4703, Web: <http://www.agsgrmmr.sch.ae>

Confidential Reference Form: **Admission of Grades KG & 1**

Applicant's Name	Date
Current School	Current Grade
Current School Curriculum (ex. British)	
<p>This student is seeking admission to Abu Dhabi Grammar School (Canada), Abu Dhabi, UAE. The school follows the Nova Scotia (Canada) curriculum, delivered in English. This form is confidential and will only be used for admissions purposes. We greatly appreciate your honesty and cooperation. Please email the completed form directly to Abu Dhabi Grammar School (Canada) at admissions@agsgrmmr.sch.ae from your official school email address.</p>	
Applications will not be processed without the submission of this form.	

How long have you known the applicant? _____ Your role at School: _____

How often do you see the applicant? ☐ Daily ☐ Weekly ☐ Monthly ☐ Less Often: _____

What are the first 3 words that come to mind when thinking of the applicant?

1. _____ 2. _____ 3. _____

Check the applicant's developmental progress in the following areas:

	Above Level	At Level	Approaching Level	Below Level
Cognitive Development				
Emotional Development				
Motor Development				
Social Development				
Speech & Language Development				

Check the applicant's performance of tasks:

	Well Developed	Developing	Needs Development
Using scissors			
Using crayons			
Writing own name			
Expressing self			
Assembling puzzles			
Letter Recognition			
Recognizing shapes			
Counting numbers			

Check the applicant's attitude and behaviour:

	Excellent	Good	Needs Development	Significant Concerns
Attitude				
Behavioural management				
Follows directions/Completes tasks				
Attentive/Focused				
Relationship with peers				
Relationship with adults				
Separation Issues				
Attendance				
Punctuality				

Please check yes or no:

	Yes	No
Will the applicant most likely need an Individualized Program Plan (IPP)?		
Has the applicant received extra support in school (EAL; special education)?		
Has the applicant received speech therapy?		
Has the applicant received occupational therapy?		
Has the applicant seen any outside specialist?		

Please include additional details to questions that received a 'yes' on a separate attachment.

Does the applicant have any diagnostic testing evaluation or results that you are aware of? If so, please specify:

Are there any special strategies or interventions you recommend be used with the applicant? If so, please explain.

Does the applicant have special behavioural, psychological, or emotional needs that might impact school performance? If so, please explain.

How would you describe the parents' involvement and support in the applicant's education (e.g., communication with teachers, consistency at home, adherence to school expectations)?

Is the applicant permitted to re-enroll in your school? If not, please explain.

Your Name	Title	School Stamp
Email Address		
Signature	Date	