

# Reception of a student of foreign origin in grunnskoli - questionnaire suggestion -

*Information about the child from interviews with the child's parents:*

School employee taking the interview: \_\_\_\_\_

Job title: \_\_\_\_\_ Date.: \_\_\_\_\_

Child's name: \_\_\_\_\_ ID: \_\_\_\_\_

Address: \_\_\_\_\_ Tel.: \_\_\_\_\_

Nationality: \_\_\_\_\_  Girl  Boy

Country of birth: \_\_\_\_\_ Language: \_\_\_\_\_

Father's name: \_\_\_\_\_ Father's ID: \_\_\_\_\_

Nationality: \_\_\_\_\_ Language: \_\_\_\_\_

Occupation in country of origin: \_\_\_\_\_

Occupation in Iceland: \_\_\_\_\_

Daily working hours: \_\_\_\_\_

Telephone/mobile: \_\_\_\_\_ Tel. at work: \_\_\_\_\_

Mother's name: \_\_\_\_\_ Mother's ID: \_\_\_\_\_

Nationality: \_\_\_\_\_ Language: \_\_\_\_\_

Occupation in country of origin: \_\_\_\_\_

Occupation in Iceland: \_\_\_\_\_

Daily working hours: \_\_\_\_\_

Telephone/mobile: \_\_\_\_\_ Tel. at work: \_\_\_\_\_

Sister/brother: \_\_\_\_\_ Age: \_\_\_\_\_

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Sister/brother: \_\_\_\_\_ Age: \_\_\_\_\_

Contact/agent in Iceland: \_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

Child's health, main points: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has the child been subject to traumas, mental or physical, which are likely to affect his/her feelings or behaviour?

Yes  No

If yes, describe. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does the child take any medicine regularly?  Yes  No

How was the child's education in country of origin?  Normal  Little  None

Does the child have any known learning difficulties?  Yes  No

If yes, describe. \_\_\_\_\_

\_\_\_\_\_

How was the child's behaviour in school?  Normal  Abnormal

If abnormal, describe \_\_\_\_\_

\_\_\_\_\_

Have there been any analysis made concerning the child's learning difficulties, development, or behaviour?

Yes  No

If yes, then which, and are the results available? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Did the child have many friends at school?  Yes  No

Were the child's classmates his/her age?  Yes  No

How are the child's abilities in:

Reading  Good  Average  Poor

Writing  Good  Average  Poor

Mothertongue  Good  Average  Poor

Mathematics  Good  Average  Poor

Swimming  Good  Average  Poor

Gymnastics/sports  Good  Average  Poor

\_\_\_\_\_  Good  Average  Poor

\_\_\_\_\_  Good  Average  Poor

\_\_\_\_\_  Good  Average  Poor

Does the child speak more than one language?  Yes  No

If yes, what language/s? \_\_\_\_\_

What language is spoken in the child's home? \_\_\_\_\_

Does the child have access to a computer at home?  Yes  No

If yes, does he/she have access to the internet?  Yes  No

Did the child take part in any sports in his/her country of origin?  Yes  No

If yes, what sport/sports? \_\_\_\_\_

Does the child play a musical instrument?  Yes  No

If yes, what instrument? \_\_\_\_\_

Do you want the child to go to a musical school in Iceland?  Yes  No

Is there something that needs to be considered concerning religious matters? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Is there something that needs to be considered concerning habits or rituals that is different from Icelandic ones?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long does the family intend to stay in Iceland? \_\_\_\_\_

\_\_\_\_\_

Are there any other information that the parents want the child's teachers to know about? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Parent

\_\_\_\_\_  
On behalf of the school