



Confidential Report for Pre-Kindergarten and Kindergarten

Dear Parents: Please complete **PART I Release of School Records** of this Confidential School Report and then submit the form to your child's nursery/school for completion of **PART II**. This report is an initial step in the application process for admission to The American International School of Muscat (TAISM).

PART I Release of School Records

I hereby authorize _____ to release school records of any and all academic,
(Name of Nursery/School)

psychological, speech and language testing, which may have been administered to my child, to
The American International School of Muscat, for the purpose of admissions assessment.

Student's name: _____ Current Year/Grade: _____

Student's Date of Birth (DD/MM/YY): _____

Signature of parent: _____ Date: _____

PART II - For Nursery/School Official (administrator, counselor, or teacher):

*Please complete the following 2-page confidential report for the student listed above and **submit directly to TAISM**, along with any available school/testing reports.*

1. School/Program Information

- a) Curriculum or methodology followed by your nursery/school (e.g. American, United Kingdom, Montessori, Free play, Creche, any other): _____
- b) Number of teachers in the classroom: _____ ; Class size: _____

2. How long have you known the child: _____

3. Describe how the student expresses her/his wants and needs (e.g. verbal, gestures, etc): _____

4. How does the child play and interact with children in class? _____

5. From your observations in the classroom, what do you see as the child's strengths? _____

6. Indicate the student's developmental progress in the following domains:

	Above Level	On Level	Below Level
Cognitive Development	_____	_____	_____
Emotional Development	_____	_____	_____
Motor Development	_____	_____	_____
Social Development	_____	_____	_____

Is the child toilet-trained? ☐ Yes ☐ No

Does the child separate from parents easily? ☐ Yes ☐ No

Can the child be understood in her/his home language? ☐ Yes ☐ No

Does the child have different learning needs, from same-aged peers, that should be considered?

☐ Yes ☐ No

If yes, please indicate details: _____

7. Are there any concerns regarding this child's behaviors? ☐ Yes ☐ No

If yes, please elaborate: _____

Additional Comments (optional): _____

Name & signature of person completing this form: _____

Title: _____

Name of the school: _____

Contact email: _____ **Date:** _____

Phone: _____

School Stamp:

Please forward this form and all records to the Admissions Coordinator

Via Email: admissions@taism.com (preferred)

or Post to: The American International School of Muscat
P.O. Box 584, Azaiba, P.C. 130
Sultanate of Oman
Website: www.taism.com