

Maths

Science

Tel: 020 8555 5959 E: girls.school@azharacademy.org

Azhar Academy Girls School Reference Form

Name of pupil		
Name of school		
Year group		
Date of birth		
Ethnicity		
Is this pupil entitled to free school meals?		
UPN number		
Start date at primary school?		
Please complete the table below using the following criteria: 1. Excellent 2. Very good 3. Good 4. Satisfactory 5. Poor		
	(1 to 5)	Comment
Behaviour		
Effort		
Homework		
Relationship with peers		
Relationship with teachers		
Please provide more information	on if the pupil's score is 4 or 5 fo	or any of the criteria.
	Percentage (%)	Comment
Attendance	7-10-11-11-11-11-11-11-11-11-11-11-11-11-	
Punctuality		
Please provide information on the pupil's current level and expected level at the end of KS2.		
Subject	Current level compared to the Nationally Expected Levels	Expected Level for end of KS2- compared to the Nationally Expected Levels
English		

Student Educational Support Does the pupil have any educational/additional needs? Yes No If yes, please specify the needs: Does the pupil have an educational health care plan (EHCP)? No Yes Does the pupil require help and support with the national curriculum? Yes No If yes, please provide details of what support is in place Is English language support provided? Yes No If yes, please provide details on the level of support provided

Are there any social and/or relationship concerns?			
Yes No			
If yes please provide the diagnosis, details and any action plan put in place.			
Has the pupil ever been suspended/excluded from the school?			
Yes No			
Details and date of suspension(s):			
Name of Teacher	School Stamp		
Position in school			
Signature			
Date			

Please email the completed form to n.ghazali@azharacademy.org.

Thank you very much for your time and assistance.

N Ghazali Office Manager