**Extra information FORM – high school**

**Name of the student: ………………………………………………….**

1. Father’s/legal guardian’s name
   1. Occupation
   2. Current job
2. Mother’s/legal guardian’s name
   1. Occupation
   2. Current job
3. Formal relationship of the parents *(sacramental marriage, separation, divorce, other)*

1. Other parties eligible to enquire information about the student:
2. Are parents current inhabitants of Poland? mother YES/NO father YES/NO
3. Siblings of the student (names, dates of birth)

1. As a family, what do you pay special attention to in the process of bringing up your children?

Which values do you consider the most important?

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1. As parents, what do you value the most in your child?

In order for the school to be able to provide appropriate psychological-pedagogical support (according to the resolution of the Polish Ministry of Education), please indicate the areas, in which you would expect the school to assist your daughter:

1. Learning difficulties (underline all that apply): dyslexia, dysgraphia, dysorthography

Other (specify)

a) Does your daughter have a specialist opinion on special educational needs? YES/NO

b) Does your daughter attend a psychological and pedagogical counselling center? YES/NO

What kind of?

1. Special talents (what kind of?)

Has she been supported in this area? (How?)

1. Physical/mental disabilities (please specify)
2. Chronic diseases, health issues
3. Specialist councelling center (what kind of?)
4. Experience of crisis situations and trauma YES/NO
5. Environment and behaviour problems

a) in family

b) with peers

c) social

d) other

8. Adaptation difficulties

a) changing the place of living

b) cultural challenges, including a previous stay abroad

c) linguistic (limited competency in the Polish language)

I hereby declare that the data provided in this questionnaire is true. I also acknowledge and consent to the processing of the personal data included in this questionnaire for the purpose of the school admissions process. Upon a positive application result, I consent to the processing of this data by the school under the Data Protection Act.

………………………. ……………………………………………………

date parents’/legal guardians’ signature