

Please tell us about your child's Japanese language ability.

Name:

Grade as of September, current year:

(1) How often is your child exposed to Japanese?

- A) Everyday } Please go to (2)
B) Sometimes }
C) None → Please go to (4)

(2) Where does your child use Japanese?

- A) Home → with whom does he/she speak? ()
B) School → Name of school ()
C) Others → ()

(3) Is your child able to communicate in Japanese?

- A) Yes, understands and speaks Japanese.
B) Yes, understands what people say in Japanese, but answers in English.
C) No

(4) How much Hiragana does your child know?

- A) He/she can read hiragana.
B) He/she can read and write hiragana.
C) He/she has been learning hiragana. Please circle (Read / Write)
D) He/she cannot use Hiragana.

(5) Has your child studied Japanese at any other Japanese school?

- A) Yes Name of school ()
How long? ()
B) No