



Languages Diagnostic Test

Student's Name:	School Name:
Language Assessed:	Year level would like to enrol:
Prior Knowledge of Language	<input type="checkbox"/> None <input type="checkbox"/> 1-3 Years <input type="checkbox"/> Native <input type="checkbox"/> Background (Tick one only)
Assessment Conditions	
<p>This diagnostic test is to be carried out under strict exam conditions. The result of the test will assist the language teachers and enrolment officers of CSDE to determine the best language class level the student should be placed in.</p>	
Assessment Task and Instructions	
<p>Task: In the target language, write a self-introduction. The information can include personal information, family, school life, hobbies and sports, pets and leisure time.</p> <p>Instructions:</p> <ol style="list-style-type: none"> 1. Time allowed 30 minutes, dictionary and/or online translator is NOT permitted. 2. Write 100-150 words for Y6-9 enrolment; 150-250 words for Y10-12 enrolment. 3. Once finished, please scan and email back to schoolbasedenrolments@cairnssde.eq.edu.au for marking and feedback. 4. Include supervisor's name and phone number for us to contact you for a possible speaking test. <p>Name: _____ Phone Number: _____</p>	
CSDE use only	
Examiner to complete	This student's diagnostic test is marked by _____. The student is recommended to be enrolled into Year _____. Signed: _____ Date: _____
HOD to complete	<input type="checkbox"/> There is a place in the class of the recommended year level. <input type="checkbox"/> There is no available place in the recommended year level.
SBE EO to complete	<input type="checkbox"/> The student's enrolment is finalized (if there is a place) <input type="checkbox"/> The student will go on a waiting list (determined after contacting base school) <input type="checkbox"/> The student will withdraw enrolment application (determined after contacting base school) <input type="checkbox"/> Attach Test to enrolment paperwork

