Annual National Assessment 2012

Form to be completed to request specially adapted tests for certain categories of LSEN learners in a school

In order to provide appropriate test papers to learners with special educational needs (LSEN learners) the DBE requires information on learners in particular LSEN categories from each school that has learners in one or more of the categories mentioned below.

LSEN categories for which information is required:

- Blind
- Partially sighted
- Deaf or hard of hearing

When you fill in the form with respect of blind learners you have to distinguish between the two kinds of Braille, uncontracted and contracted.

For the partially sighted you should also indicate the font size required.

For the Deaf or hard of hearing you should indicate both the number of hard copies of tests and the number of tapes required.

The Annual National Assessment

- For ANA 2012 each learner has to take a Language and Mathematics test.
- The test must be taken in the LOLT of the learner.
- The level of the Language test must be the same as the level at which the Language is studied (HL or FAL).

You are required to fill in the requirements of your school in the appropriate tables in the sheets that follow.

ANNEXURE 1

Number of test papers required for learners in various LSEN categories

Province _____

District: _____ School name: _____

9 digit school EMIS number:

Please fill in the number of test papers required by your school in the appropriate boxes.

A. Papers for the Blind - Braille

Foundation Phase

	English		Afrikaans		IsiXhosa		Seotho		
Grade	Contracted	Uncontracted	Contracted	Uncontracted	Contracted	Uncontracted	Contracted	Uncontracted	
1									
2									
3									

Intermediate Phase and Grade 9 Language:

		Grade 4		Grade 5		Grade 6		Grade 9	
Language		HL	FAL	HL	FAL	HL	FAL	HL	FAL
English	Uncontracted								
	Contracted								
Afrikaans	Uncontracted								
	Contracted								

(Mathematics requirements will also be calculated from the above.)

Principal Name: _____

Principal Signature:

Circuit Manager/District official: Name:_____ Signature:_____ Date: _____

B. Papers for the partially sighted

Please indicate both the number of test papers required and the font required.

Foundation Phase:

	Grade 1		Gra	de 2	Grade 3		
Language	Number Font size		Number	Font size	Number	Font size	
Afrikaans							
English							
IsiXhosa							
Sesotho							

Intermediate Phase and Grade 9 Language:

		Grade 4		Grade 5		Grade 6		Grade 9	
Language		HL	FAL	HL	FAL	HL	FAL	HL	FAL
English	Number								
	Font size								
Afrikaans	Number								
	Font size								

(Mathematics requirements will also be calculated from the above.)

Principal Name: _____

Principal Signature: _____ Date: _____

Circuit Manager/District official: Name:______ Signature:_____ Date: _____

C. Papers for deaf and hard of hearing (Papers and CDs)

Please indicate the number papers and CDs required.

Foundation Phase:

	Grade 1		Gra	de 2	Grade 3		
Language	NumberNumberof papersof CDs		Number of papers	Number of CDs	Number of papers	Number of CDs	
Afrikaans							
English							
IsiXhosa							
Sesotho							

Intermediate Phase and Grade9 Language:

		Grade 4		Grade 5		Grade 6		Grade 9	
Language		HL	FAL	HL	FAL	HL	FAL	HL	FAL
English	Number of papers								
	Number of CDs								
Afrikaans	Number of papers								
	Number of CDs								

(Mathematics requirements will also be calculated from the above.)

The number of test papers shown above will be adequate for this school.

Principal Name: _____

Principal Signature: _____ Date: _____

Circuit Manager/District official: Name:_____ Signature:_____ Date: _____