

# Student's Preferred Mode of Learning (Grade 1 - 10)

Good day! This instrument aims to determine your preferred mode of learning as we start S.Y. 2020 - 2021. The information that will be collected will be helpful in designing the learning activities for your child. Kindly discuss this with your family before submitting your answer. Please take note that your mode of learning will not be easily changed as your responses shall be used as the basis of your learning setup.

Answer all needed information. Before clicking 'submit' kindly recheck your answer. Take note that email addresses are case sensitive. In order to be able to receive all information regarding your schedule and other important announcements, please make sure that all information are correct.

Rest assured that all information will be treated confidential.

\* Required

Name of Student (First Name Middle Initial Last Name) \*

Your answer

Type of Student \*

- Old Student
- New Student



What is the status of the student's enrollment? \*

- Registered Online (received text confirmation)
- Assessed (has the assessment form - yellow form)
- Enrolled (already paid the downpayment)
- Student who is yet to enroll

Grade Level and Section (Kindly answer based on the official section given to you by the registrar) \*

Choose

Preferred Mode of Learning (Please read the description of the two modes of learning before selecting.) \*

- FULL ACCESS (students who have access to internet and have electronic gadget (laptop desktop, tablet, or cellphone) at home. Students will be able to attend online classes and will subscribe to the school's learning management system.)
- LIMITED ACCESS (students who have access to internet and are sharing electronic gadgets with siblings (who may or may not be enrolled in SnJA). In cases they cannot go online or attend synchronous lessons, they will be receiving instructions in advance.)

Parent's/Guardian's Name \*

Your answer



Parent's Guardian's Contact Number (this shall be used for instant messaging) \*

Your answer

Student's Contact Number (this shall be used for instant messaging) \*

Your answer

STUDENT'S EMAIL ADDRESS (Please check if the spelling and capitalization are correct to be able to receive all communications from the school. This will also be the email address that will be used for synchronous activity via Zoom. For pupils in the elementary level, they may use the email address of their parent). \*

Your answer

PARENT'S EMAIL ADDRESS (Please check if the spelling and capitalization are correct to be able to receive all communications from the school.) \*

Your answer

FACEBOOK NAME (Optional. This shall only be used when the email address or any of the contact numbers written on this form cannot be contacted)

Your answer

**Before submitting the form, please re-check all information.**



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