

ARMY PUBLIC SCHOOLS FOR INTERNATIONAL STUDIES

LOW READINESS LEARNER'S RECORD

SCHOOL: _____ REGION: _____



Low Readiness Learner's Record

Name of Student: _____ Class/Section: _____ Age: _____

Supporting Information (if any): _____

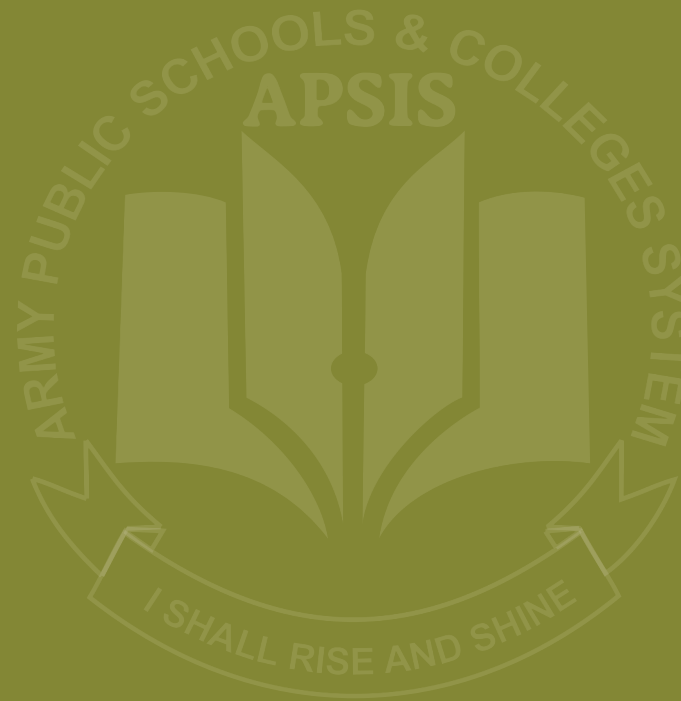
Date	Subject	Areas of Improvement	Remedial Measures	Follow up

Teacher's Sign: _____

Date: _____

Section Head's Sign: _____

Date: _____



APSACS SECRETARIAT

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