



Certificate of Attainment in Greek

Candidate's Questionnaire for level A1 (aged 8-12) May 2026

Examination Centre:					
Examination Centre Code No:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
City:			Country:		

Candidate's Name:					
Candidate's Surname:					

Sex:	1. male	<input type="checkbox"/>
	2. female	<input type="checkbox"/>

Mother tongue:			
Do you have relatives of Greek origin?			
father	<input type="checkbox"/>	mother	<input type="checkbox"/>
other	<input type="checkbox"/>		
both father and mother	<input type="checkbox"/>		

	YES	NO
Do you learn Greek at school?	<input type="checkbox"/>	<input type="checkbox"/>

	YES	NO
Have you ever visited Greece?	<input type="checkbox"/>	<input type="checkbox"/>
Do you live in Greece permanently?	<input type="checkbox"/>	<input type="checkbox"/>

	YES	NO
Do you have any Greek friends?	<input type="checkbox"/>	<input type="checkbox"/>

Language of communication with them: _____

What other languages (besides your mother tongue) do you know and how well do you know them?

Language	poor	adequate	very good

You communicate in Greek:	never	rarely	often	always
with your father				
with your mother				
with your sister/brother				
with your relatives				
with your friends				
at school				
in your Greek language class				
with your neighbours				
at shops/restaurants				
when traveling				

Date: _____	Signature: _____
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