

ADMISSIONS

PRINCIPAL / COUNSELOR RECOMMENDATION FA-006

Date	Date of completion							
Day	Month	Year						

A. GENERAL	INFORMATION								
Applicant's La	ast name	Applicant's First Name							
Counselor's L	ast name	ne Coi			Counselor's First Name				
School's Nam	ne					\	_		
City			Cou	ntry					
Email	<u> </u>		Tele	phone					
The enclose B. DETAILED	cation process and will be considered information is strictly confidence. INFORMATION The process and will be considered information is strictly confidence. INFORMATION The process and will be considered in the considered in		e Admis	sions C	Ommiti	tee. Please	complet	e this form and email i	
2. Please writ	te a brief description of the app	licant's streng	gths.						
	te a brief description of the app			in his or	her ag	e group w	hom you	have met.	
3. Please eva	aluate the applicant in comparis			in his or	her ag	e group w	hom you	have met.	
3. Please eva	aluate the applicant in comparis	on to other st	tudents				hom you	have met.	
3. Please eva	aluate the applicant in comparis itiative, independence elf - confidence	on to other st	tudents				hom you	have met.	
3. Please eva	aluate the applicant in comparis itiative, independence elf - confidence esponsibility	on to other st	tudents				hom you	have met. Outstanding	
3. Please eva	aluate the applicant in comparis itiative, independence elf - confidence esponsibility laturity	on to other st	tudents				·		
3. Please eva	aluate the applicant in comparis itiative, independence elf - confidence esponsibility laturity /ork habits	on to other st	tudents				<u>О</u> Н	Outstanding High	
3. Please eva	iluate the applicant in comparis itiative, independence elf - confidence esponsibility laturity /ork habits aily routines	on to other st	tudents				<u>O</u>	Outstanding High Average	
3. Please eva	iluate the applicant in comparis itiative, independence elf - confidence esponsibility laturity /ork habits aily routines onflict resolution skills	on to other st	tudents				<u>О</u> <u>Н</u> <u>А</u> <u>L</u>	Outstanding High Average Low	
3. Please eva	itiative, independence elf - confidence esponsibility laturity /ork habits aily routines onflict resolution skills oncern for others	on to other st	tudents				<u>О</u> Н	Outstanding High Average	
3. Please eva	aluate the applicant in comparis itiative, independence elf - confidence esponsibility laturity /ork habits aily routines onflict resolution skills oncern for others elationship with adults	on to other st	tudents				<u>О</u> <u>Н</u> <u>А</u> <u>L</u>	Outstanding High Average Low	
3. Please eva	itiative, independence elf - confidence esponsibility laturity /ork habits aily routines onflict resolution skills oncern for others	on to other st	tudents				<u>О</u> <u>Н</u> <u>А</u> <u>L</u>	Outstanding High Average Low	

		_	1	1	_	1		
	Overall academic achievement							
	Academic capacities							
	Understanding of oral English						<u> </u>	Outstanding
	Spoken English						<u>H</u>	High
	Reading comprehension in English						<u>A</u>	Average
	Written English						L	Low
	Reading skills						NA	Not Applicable
	Mathematical logical thought						INA	тот Арріїсавіс
	Math Facts							
	OVERALL							
4. Which extracurricular activities does the student participate in? Does the student have special talents, skills, or interests? Please specify. 5. Does the applicant have learning issues that may limit his/her participation in the school program? If so, explain.								
6. Please comment on the applicant's behavior.								
7. Are there any personal or psychological factors that we should be aware of?								
8. How does the applicant handle conflicts or challenging situations involving peers?								
9. Do the applicant's parents or guardian participate in school activities? If so, Which?								
10. Are the applicant's parents or guardian open to suggestions and supportive of the applicant's learning?								

11. Please add any additional information that you consider would give us a more complete picture of the applicant.

0

NA

Counselor's Signature _____