

International School of Dongguan Admissions

CONFIDENTIAL TEACHER RECOMMENDATION FORM – Elementary School (Grade 2 – Grade 5)

Evaluator Section

The student above has applied to International School of Dongguan. Your candid appraisal of the student will help us determine whether ISD, an international college preparatory school, is a sound match for the student. Thank you for your help in this assessment.

Name of Evaluator:		Position:	
School:		City/Country:	
Email:			
How long have you known this child:		Date of child's enrollment:	

Please evaluate the applicant's in relation to his or her fellow students as follows:

Academic Qualities	Excellent	Good	Average	Below Average	Poor
Academic achievement					
Intellectual curiosity					
Follows directions					
Completes tasks					
Organizational skills					
Ability to work independently					
Ability to communicate ideas					
Critical thinking skills					
Class participation					
Math performance (choose one)	Above grade level		On grade level	Below grade level	
Reading performance (choose one)	Above grade level		On grade level	Below grade level	
Writing performance (choose one)	Above grade level		On grade level	Below grade level	
Overall assessment of academic qualities					

Personal Qualities	Excellent	Good	Average	Below Average	Poor
Accepts/responds to teacher directions					
Adaptability/flexibility					
Self-confidence					
Attentive/focused					
Consideration of others					
Self-control					
Ability to act independently					
Willingness to participate in a group					
Relationship with peers					
Relationship with adults					
Overall assessment of personal qualities					

Family Information	Consistently	Usually	Sometimes	Rarely
Communicates openly with school				
Participates in school activities				
Cooperates with classroom teachers				
Cooperates with administration				
Follows the rules and policies of the school				
Has realistic expectations for their child				

1. How might you describe the applicant's major strengths and areas for growth?
2. What special talents or abilities does the applicant demonstrate?
3. What behavioral difficulty, if any, has the applicant demonstrated either at school or elsewhere?
4. What support services, if any, has the applicant received? Check if previously or currently participating in any programs or services listed below:
ELL/ESL Gifted/Talented Remedial/Learning Support
Behavior Management Other (describe)

Describe any of the programs checked above (attach a separate sheet if necessary). Also, please indicate if any comprehensive educational assessments have ever been conducted such as a psycho-educational evaluation. If so, give the date and describe the type of assessment.

Date

Evaluator's Signature

Please fax or send as an email attachment to admission@i-s-d.org

THANK YOU VERY MUCH FOR TAKING THE TIME TO COMPLETE THESE PAGES.