

SCHOOL RECOMMENDATION FORM



Name of Applicant:	Grade for which applying:
Recommender's Name:	Position:
In what capacity have you known the applicant?	For how long:

This student is seeking admission to the International American School of Cancun, A.C. **Please complete this form and email or fax it to us.**

We would appreciate your observations about areas listed below. Indicate your ratings by numbers (1 to 5) in the right-hand column. Please use a question mark where you have insufficient evidence on which to make a judgment. If you wish to discuss this student personally rather than complete this form, please check here (), sign the form, and note your telephone number/email address.

AREAS	1	2	3	4	5	Your Rating
ACADEMIC ABILITY	Exceptionally promising, high honor roll	Fine student, probably honor roll	Capable of passing work, but no honors	Marginal ability or questionable motivation	Poor academic ability	
EXTRA-CURRICULAR ACTIVITIES	Outstanding leader, "top" activities	Major office, real contributor	Fairly active, minor offices, minor activities	Minor participation, no offices	Few or no activities	
INTEGRITY	Exceptionally upright	Noticeably upright	Upright. No cause to question	Weak or questionable	Record of dishonesty	
CONDUCT	outstanding in every respect	Generally excellent	Good or acceptable	Marginal	Poor personal habits	
INITIATIVE AND DRIVE	Outstanding, very focused	Well above the average	Generally strong enough	Occasionally weak or lacking	Very weak	
CARE AND RESPECT FOR OTHERS	Outstanding	Excellent	Good	Lacks concern	Unconcerned	

EMOTIONAL ADJUSTMENT	Exceptionally well adjusted	Well balanced	Usually well balanced	Excitable or unresponsive	Very emotional or apathetic	
OVERALL RECOMENDATION	Outstanding	Excellent	Good	Fair	Poor	

We would appreciate receiving your answers to the following questions related to the student. Please elaborate on your affirmative answer to questions 2-4 on the back of this form or on an additional page.

1. Is the student in good standing and eligible to re-enter your school if you offer the next grade level? Yes () No()
 2. Has any serious disciplinary action ever been taken on this student? Yes () No()
 3. Has the student any significant limitations or weaknesses? Yes () No()
 4. Are his/her parents cooperative? Yes () No()
 5. How would you compare this student to others whom you have observed in similar circumstances?
- Below average () Fair () Good () Excellent () Outstanding ()

Please use the back of this form to write a narrative report to further describe the student if you wish.

Date _____ Signature _____
School Name _____ School Address _____
City _____ State _____ Zip Code _____

Thank you for your time and effort in evaluating this student.

inquiries@iasces.com
(52)(998)882-2269 or 2273