

Confidential Recommendation Form

This section needs to be completed	by parents;				
My/our child,appreciate your assistance in control provide information requested	completing this c	onfidential recon	nmendation for	m. I/we give p	
Parent/Guardian:			Date	:	
Form completed by					
Name					
Position					
School Name					
School Address					
School Curriculum					
Student's Current Grade					
Email address					
How long and in what capacity have you known the student?					
Signature:			Date : _		
Academic Qualities					
·	Not observed	Below Average	Average	Good	Outstanding
Curiosity					
Attitude towards learning Makes efforts					
Follows directions					
Focuses on tasks					
Completes tasks					
Ability to work independently					
Ability to communicate ideas					
Critical thinking skills					
Class participation					
Small group participation					
English – Language Ability Please indicate the student's Englis	sh language ability	on the spectrum b	elow.		
to English skills wh		an understand, spea and construct simple sentences	speaki	ng ability in ing and ling English	Native level English
			andorbunic		I
Achievement Level (in language s	spoken at current s		eted level	Above ex	pected level

Math achievement Reading achievement Writing achievement



Personal Qualities

	Not observed	Below Average	Average	Good	Outstanding
Adaptability/flexibility					
Self-control					
Confidence					
Consideration of others					
Maturity					
Relationship with peers					
Relationship with adults					

Relationship with adults					
What are this student's strengths	and weaknesse	es?			
Do you have any developmental, eelaborate.	emotional, beha	vioural or other	concerns regard	ing this student	? If so, please
Is this student receiving any spec	ial education se	rvices and/or tu	toring support?]	If so, please elab	orate.
In what ways have the student's pelaborate.	parents been cod	operative and su	pportive in worl	king with school	? Please
Any additional comments.					

Thank you for your time and expertise in completing this form. Please return the completed form by email, fax or postal directly to school. Or you can give this form to the parents in a sealed envelope.

Email: admissions@yoyogiinternationalschool.com

Fax: (within Japan) 03 5478 6713 (from overseas) +81 3 5478 6713

Post: Admissions Office

Yoyogi International School

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