



Notes to parents/guardians of applicant: Request that at least one teacher completes this form. Teachers must return this form directly to the International School of Havana.

Notes to teachers: Information from teachers is extremely valuable to our Admissions Department in determining if the International School of Havana is an appropriate setting for a student. Based on your professional judgment, please complete this form and return it to us at your earliest convenience. Your response will remain confidential. If any question does not apply to this student, please mark "N/A".

Applicant's name (s) and Surname (s): _____ Date of Birth: _____
D/M/Y

School: _____ Last Grade Completed: _____

Teacher's Name: _____

During which academic years have you taught this student? (Please indicate the level). In what other context(s) have you known this student?

Please evaluate the applicant relation to other students in your school, by placing an "X" in the appropriate box.

ACADEMIC QUALITIES	Excellent	Good	Average	Below Average	Poor	No Evidence
Academic Potential						
Academic Achievement						
Effort and Persistence						
Clarity & Organization of Written work						
Motivation and Drive						
Intellectual Curiosity						
Study Habits						
Attentiveness/focus						
Oral Expression						
Ability to work independently						
Ability to work in groups						





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PERSONAL QUALITIES	Excellent	Good	Average	Below Average	Poor	No Evidence
Honesty / Integrity						
Emotional stability						
Self-confidence/self esteem						
Tolerance for differences						
Level of Maturity						
Responsibility						
Personal Behaviour						
Respect for others						
Leadership						
Relationship with peers						
Relationship with adults						
Ability to learn from his/her own mistakes						

If you checked "Below Average" for any category mentioned above, please explain.

What words come to your mind when describing the applicant's major strengths and areas for development?

Please describe any disciplinary, emotional, behavioral or other concerns regarding this applicant.

Is this student enrolled in any special programmes?

Please provide information about the level of services provided (i.e. hours per day/week, pull-out or inclusion, etc.)

PROGRAMME	Comments
Diagnosed learning disability	
Educational/Psychological	
Speech/Language	
English as an Additional Language	
Counselling/Individual Behaviour programme	
Gifted/Talented	





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Has this student been recommended for and/or exited from any special programmes? If yes, please comment.

Has this student been retained in the past? If yes, please comment.

Has any testing been done that would assist us in assessment and placement? If so, what?
(This might include standardized testing, such as ERB, ITBS or NJASK or specialist testing, such as WISC III, WISC IV or WIAT II)

What type of course has this student been enrolled in this academic year? If your school offers different levels of study (e.g. Honors / Regular / Basic), please indicate the course level this student has been following.

- | | | |
|-------------------------------------|---|--------------------------------|
| <input type="checkbox"/> Algebra 1 | <input type="checkbox"/> Pre-calculus | <input type="checkbox"/> GCSE |
| <input type="checkbox"/> Algebra 2 | <input type="checkbox"/> Calculus | <input type="checkbox"/> IGCSE |
| <input type="checkbox"/> Geometry | <input type="checkbox"/> Common Entrance | <input type="checkbox"/> KS3 |
| <input type="checkbox"/> Statistics | <input type="checkbox"/> Standard Grade
(Scotland) | <input type="checkbox"/> KS4 |
| <input type="checkbox"/> Other | | |

Please comment in more detail on this student's work in mathematics, keeping in mind his/her ability to grasp and retain concepts and methods and employ mathematical reasoning.





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Please include any additional information about the applicant's character, performance, and potential as a student. If you know of any special talents or activities, please describe.

Is there any additional information that can be better conveyed in a phone conversation? Yes No

If we need further information, may we contact you? Yes No

I recommend this student for admission to ISH:

enthusiastically strongly without reservations with reservations not at all

The International School of Havana appreciates the time you have taken to complete this recommendation. Please email this confidential recommendation form directly to the Admissions Office of ISH at admissions@ish.co.cu

Form completed by: _____ Position: _____

Signature: _____ Date: _____

