



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 judgement, 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: _____

How long have you known this child? _____

Dominance Right: _____ Left: _____ Not established: _____

CATEGORY	Area of strength	Age Appropriate	Progressing	Area of Concern	N/A
PHYSICAL DEVELOPMENT					
Gross motor coordination					
Sense of body in space					
Gait, fluidity, smoothness of movement					
Participates in physical group					
Fine motor coordination					
Draws with details					
Uses appropriate pencil grip					
Works with manipulatives					

Comments:



ADMISSIONS

CATEGORY	Area of strength	Age Appropriate	Progressing	Area of Concern	N/A
INTELLECTUAL					
<i>Receptive Skills</i>					
Follows directions given to a group					
Follows directions given individually					
Follows multiple step directions					
Understands stories read aloud					
Understands classroom discussion					
Memory for events and information					
<i>Expressive Skills</i>					
Clarity of speech					
Fluency of expression					
Vocabulary					
Ability to stay on discussion topic					
Word retrieval					
Appropriate syntax					
Tells story events in sequence					
<i>Reading Readiness</i>					
Sound-symbol correspondence					
Recognizes letters - upper case					
Recognizes letters - lower case					
Rhyming					
<i>Mathematics</i>					
Recognizes shapes					
Recognizes numerals					
Understands one-to-one					
Patterning					
Categorizing					
Understands comparative terms					

Comments:



ADMISSIONS

CATEGORY	Area of strength	Age Appropriate	Progressing	Area of Concern	N/A
SOCIAL/EMOTIONAL					
Self-esteem					
Acceptance of limits					
Self-motivation					
Ability to work independently					
Interaction with peers					
Interaction with adults					
Seeks help when needed					
Resolves conflicts verbally					
Internalization of classroom routine					
Separation from parents/caregivers					
Ability to share					
Ability to wait for turn					
Respect for own property					
Respect for others' property					
Accepts responsibility for actions					
Ability to tolerate frustration / self-chosen					
Ability to tolerate frustration / assigned activity					
Sense of humor					
Curiosity					
Self-starter					
Attention span / self-chosen activity					
Attention span / assigned activity					
Completes tasks					
Co-operative attitude					
Leadership skills					
Ability to follow peers					
Respects classroom routines					
Makes transitions easily					
Reacts well to new experience					
Accepts change					
Comfort with large group					
Comfort with small group					
Comfort alone					



TEACHER QUESTIONNAIRE
Pre-Kindergarten & Kindergarten



International
School
of Havana

ADMISSIONS

CONFIDENTIAL

Usually chooses: Large group () Small Group () Alone ()

Usually takes role of: Leader () Follower () Varies ()

Is this child ready for a full-day school programme? Yes () No ()

Are the student's parents supportive of the programmes and policies of the school? Yes () No ()

Please comment in more detail on special or unique intellectual qualities of this student (intuition, creativity, vocabulary, mathematical understanding, imagination, learning preferences, artistic or musical talent etc.).

Please comment on the social skills, and character of this student (group interaction skills, attitude, leadership, initiative, responsibility, empathy, sensitivity, independence etc.).

Are there any special concerns about the child's attendance or promptness in arrival or departure?

Are there any additional comments you feel are important regarding this child?

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 ()

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: _____

