

Principal / Counselor

Please send this recommendation to the following schools:

Name of Student

Candidate for Grade

Personal Qualities

	Superior (Top 10%)	Above Average	Average	Below Average	No Basis for Evaluation
Respect for others					
Cooperation					
Sense of Service					
Responsibility					
Self-Confidence					
Initiative					
Integrity & honesty					
Interaction with Faculty					
Leadership					
Sense of humor					
Maturity					

How long have you known the student?

Has the student studied a Foreign Language?

Yes No

Which language?

Number of years?

Classes per week

Which language(s) are spoken in the home?

Does this student have any special talents or has the student received any award or recognition?

Is the student habitually tardy or absent?

Yes No If yes, please elaborate:

Is this student in good standing with your school?

Yes No If no, please explain:

Has the student been disciplined for a severe infraction?

Yes No If yes, please explain:

