

Name of applicant: _____ Current Grade: _____ Grade applying for: _____

PARENT OR GUARDIAN: please write your child's name in the spaces provided (both pages), read and sign the following before submitting to your child's **Principal or Counselor**.

I understand and agree that the information contained in the recommendation is **confidential**. I also understand that this form will not be available to the applicant, parents or anyone outside the Admission's Committee.

Signature of parent or guardian

Date

PRINCIPAL / COUNSELOR: The purpose of this recommendation is to assist ASD with the admission decision. Your information and insight are an important part of the student's application. Be assured that your recommendation will be kept in the strictest confidence. Both pages of the form should be completed and returned directly to ASD by email to mshsregistrar@asdubai.org.

It would be helpful to submit these materials with this recommendation:

- Standardized test scores
- A school profile (if available)
- An absent / tardy report (if the information is not included on the report card)

● What are the first three words that come to mind that describe this student?

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● Please indicate below how the student compares to his / her peers.

	One of the top few I have encountered	Excellent Top 10% this year	Good Above average	Average	Below average	No basis for judgment
Respect						
Academic potential						
Academic achievement						
Intellectual curiosity						
Effort / determination						
Creativity						
Willingness to take intellectual risks						
Compassion						
Integrity						
Self-esteem						
Maturity (relative to age)						
Responsibility						
Respect accorded by faculty						
Respect accorded to peers						
Emotional stability						
Overall evaluation as a person						

● If the student is relatively weak or strong in any areas above, please elaborate:

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- Has this student received any of the support listed below at your school, and do you feel that these services need to be continued?

	Received	Periods / hour per week	Need to continue?
English as a Second Language			Yes / No
Special education support			Yes / No
Remedial help / Tutoring			Yes / No
Speech therapy			Yes / No

- Does this student have any special learning needs? If so, please explain.

- Are there any diagnostic testing results or evaluations of which you are aware? If so, please explain.

- Is there anything about the family that would be helpful for us to know? Do the parents volunteer at your school? If so, please give us some details.

- **Summary statement:** please write a summary statement assessing in as specific terms as possible the candidate's quality and promise as a student and person. We are particularly interested in evidence about character, citizenship, relative maturity, special talents and interests, and contribution to your community.

- I recommend this candidate for the American School of Dubai:

	Enthusiastically	Strongly	Fairly Strongly	With reservation	Not recommended
Character					
Academic ability					

THANK YOU FOR YOUR ASSISTANCE IN OUR ADMISSION PROCESS!

- I would be willing to discuss this applicant by telephone or email.

Signature Principal/Counselor: _____ Print Name: _____

Date: _____ Email: _____

Phone / Fax: _____

Name and address of school: _____