



CIS Recommendation Form
Grades Gr1 - 12

Name of Applicant: _____ **Applying to Grade:** _____

I, the parent of the above-named applicant understand and agree that this reference form is confidential and will be used for the purpose of admissions assessment at CIS and will not be shared by anyone outside the Admissions Committee. I waive any right that I may have to see it.

Signature of the Parent or Guardian

Date

To the Principal, Counsellor or Teacher, please complete this form and email it to the CIS admission's Office at admissions@cisabudhabi.com, or hand it to the admissions in a sealed envelope. This form will be treated with high confidentiality and will not be shared with the parents. Thank you for your time, cooperation and honesty.

The child's application cannot be processed until this form is received in our Office of Admissions.

How long have you known this student? _____

Please check to indicate the applicant's overall current academic placement/level within your class:

| Top Ten of Class | Average Range | Below Average Range |
|-------------------------|----------------------|----------------------------|
| | | |

Has this student received any of the help listed below at your school? Do you feel that these services need to be continued?

| | <u>Period /Week</u> | <u>Need to Continue</u> |
|---|----------------------------|--------------------------------|
| 1. English as a Second Language _____ | _____ | Yes No |
| 2. Special Education Support _____ | _____ | Yes No |
| 3. Remedial Help / Tutoring _____ | _____ | Yes No |
| 4. Speech Therapy _____ | _____ | Yes No |
| 5. Enrichment and Extension _____ | _____ | Yes No |
| 6. Individual Education Plan (IEP)_____ | _____ | Yes No |

Is there any diagnostic testing evaluation or results for this student that you are aware of? If so please give details _____

Are there any special strategies or interventions you recommend be used with this student? If so please give details _____

Does this student have special behavioral, psychological or emotional needs that might impact his/her chances of success in school? Yes / No. (If so please give details on separate paper). _____



Please rate the applicant's character, academic performance and work habits:

| | Excellent | Very Good | Good | Needs Improvement | Unsatisfactory |
|--------------------------------------|-----------|-----------|------|-------------------|----------------|
| Respects School Rules | | | | | |
| Respects Others / Politeness | | | | | |
| Self-Discipline | | | | | |
| Academic Potential | | | | | |
| Academic Achievement | | | | | |
| Time Management Skills | | | | | |
| Ability to work independently | | | | | |
| Effort & Motivation | | | | | |
| Maturity (Relative to Age) | | | | | |
| Attendance | | | | | |
| Study Habits & Organizational Skills | | | | | |

How would you describe the parents' role in their child's education and their support of your school's policies and rules? _____

Is the applicant permitted to re-enrol in your school? If not please explain

Would you recommend this candidate for The Canadian International School - Abu Dhabi. (CIS)

| | Highly Recommended | Strongly | Fairly Strongly | Reluctantly | Not Recommended |
|------------------|--------------------|----------|-----------------|-------------|-----------------|
| Character | | | | | |
| Academic Ability | | | | | |

Name: _____

Please add the School Stamp.

Title: _____

School: _____

Email Address: _____

Date: _____

Signature: _____

