ஹomínícan International Scho 107 Chung Hua 1st Rd, Gushan Dist. 804 Admissions Office: 552-3989 ext. 21					
RECO	MMEND	ATION FO	RM		
This form may be completed by any Discipline, Guidance Counselor or Homer			istant Princip	al, Prefect of	Gender:
Name of Applicant					Female
					Male
Last Name First Name		Er	nglish Name		
To the Evaluator: This student is seeking a coeducational school offering instruction in Eng provide an honest and specific evaluation of the	lish from Pre-K applicant. Tha	(indergarten (age ank you very much	3) through twel a for your coop	Ifth grade (age eration and ass	18). Please sistance.
1. How long have you known the applicant?			-		
 Has the applicant been subjected to any d Comments: 					
 3. Does the applicant have any physical cond Comments:					′es No
5. Please evaluate the applicant in compariso	on with other st	tudents whom you	u have known,	1	
Performance Indicators	5 Superior	4 Above Average	3 Average	2 Fair	1 Poor
English Language Proficiency					
Fine Motor Development (age 3-7)					
Academic Performance					
Integrity					
Emotional Maturity					
Ability to Follow Instructions					
Time Management Skills					
Leadership Skills					
Problem Solving Skills					
Study Habits					
Resourcefulness and Initiative					

qualities that might be used to place the student in the	weaknesses, learning style, social skills, and/or personane appropriate learning environment.
Additional comments about this student would be g	reatly appreciated.
we contact you for further information?]No Date:
	_
Evaluator's Name:	Position:
Evaluator's Name:	Position: Telephone:
Evaluator's Name:	Position: Telephone: E-Mail:
Evaluator's Name:	Position: Telephone: E-Mail:
y we contact you for further information? Yes Evaluator's Name: School Name: School Address: Signature: Note: If the applicant delivers this c should be sealed and counters evaluator.	Position: Telephone: E-Mail:
Evaluator's Name:	Position: Telephone: E-Mail: