| To the parents/guardians: This confidential recommendation must be faxe current school. Please complete this top portion | d, scanned, or mailed directly from the applicant's and submit it to your school. |
|--|---|
| Name of applicant | Current Grade/Year |
| I authorize the release of my child's academic re | cords to the British International School of Houston. |
| | MM/DD/YYYY |
| Signature of parent/guardian | Date |
| for admission. Please be as candid as possible a | dependent school in Houston. Thank you for completing this form as part of the application about the applicant's academic background and ability. All information received from you is with a copy of the most recent school report/report card and any standardized test results |
| Teacher name | Title |
| Name of school | Telephone |
| School address | |
| How long have you known the applicant? | |
| How long has the applicant attended your school | ol? |
| What are the applicant's strengths and weaknes | ses as a student? |
| | |
| How would you describe the applicant's writing | skills? |
| | |
| (over) | |



Mathematics Teacher Evaluation Form Year 7-13

| | Excellent | Good | Fair | Poor | Comments |
|--|---------------------|---------------------|------|--|---|
| Study habits | | | | | |
| Self-motivation | | | | | |
| Creativity/Imagination | | | | | |
| Intellectual curiosity | | | | | |
| Academic potential | | | | | |
| Academic achievement | | | | | |
| Leadership potential | | | | | |
| Computation Skills | | | | | |
| Conduct | | | | | |
| Emotional maturity | | | | | |
| Sense of responsibility | | | | | |
| Self-confidence | | | | | |
| Leadership | | | | | |
| Consideration for others | | | | | |
| | | | | | |
| Integrity | | | | | |
| Social relationship with peers | | | | | |
| Relationships with adults | | | | | |
| | | | | | |
| Does the applicant have any outstanding a | abilities or defici | iencies not | | We would appreciate any additional comments and observations | |
| covered in the above categories? Yes* No | | | | | ngths, weaknesses, health, or special needs of this litional sheets if necessary. |
| Are you aware of any independent evaluat or academic reasons regarding this studen | | l, emotional, No | - | | |
| Does the applicant receive any special acco | mmodations? | | | | |
| Yes* No | | | | | |
| Have there been any disciplinary issues reverse Yes* No | garding this stud | dent? | - | | |
| | | | | | |
| *If yes, please explain: | | | • | | |
| | | | • | | |
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| | | | | | |
| | | | | | MM/DD/YYYY |
| | | | , | Your signature | Date |
| | | | | Please return the con school report/report | mpleted form with a copy of the most recent card directly to: |
| | | | | Admissions Office | |
| | | | | admissions@housto | n.nae.school |
| | | | | | |