



SCHOOL RECOMMENDATION FORM (CONFIDENTIAL)



School Recommendation Form

Please be kind enough to provide a true assessment of the candidate and send it directly to admissions@la-garenne.ch

Student's First Name			Student's Family Name
0			6
Date of Birth			Sex
		Male	Female
Nationality & Mother Tongue			Current Year/Grade
Section A			
Please write a brief description of	the student's academic str	rengths	
D			
Please write a brief description of	the student's academic we	eaknesses	
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Please write a brief description of	the student's academic we	eaknesses	
Please write a brief description of	the student's academic we	eaknesses	
Please write a brief description of			
	about this student that ma	y impact his/her learning?	
Is there anything we should know	about this student that ma	y impact his/her learning?	



Please fill in the table below

	Excellent	Good	Average	Below Average
Academic Ability				
Works Independently				
Works well in a group/collaborate				
Listens/follows Instructions				
Organizational Skills				
Observes school/ classroom rules				
Use of English				
Use of French				
General behaviour				
Resilience				
Motivation				
Self-Confidence				
Creativity				
Relation with other students				
Relation with staff				



Section B

How would you describe the student's character and personality
(level of maturity, sense of values, passion, qualities) ?
If the student is in a boarding school, how well-adapted is she/he to school life?
Has the student received any Special Educational Support in the last two years? Please give details
Has the student been formally identified as gifted and talented? Please give details
Has the student experienced any physical or emotional difficulties (bullying, depression, anxiety)?
Please give details
Has the student been subject to any serious disciplinary procedures at his/her current school? If yes, please describe.
The the state of been subject to any serious alsolphilary procedures at his her culterit school : if yes, picase describe.
Relationship between school and the family (communication, participation in child's education, financial responsibilities)?



Section C	
Would you like to add any additional comments?	
Yes No	
If Yes, please provide details	
Is there any additional information that can be bett	er conveyed in a phone conversation?
Information concerning the person complet Name & Surname:	
Information concerning the person complet Name & Surname:	ing this recommendation: Position:
Name & Surname:	Position:
Name & Surname:	Position:
Name & Surname:	Position:
Name & Surname: Email:	Position: How long have you known this candidate:
Name & Surname: Email:	Position: How long have you known this candidate:
Name & Surname: Email:	Position: How long have you known this candidate:

Please send back this file to: admissions@la-garenne.ch
Thank you for your help!