montessori
integrated school

RECOMMENDATION FORM

NAME OF APPLICANT: _____ **Gender:** ☐ Male ☐ Female
Last *First* *Middle*

School: _____

School Address: _____
Street *Barangay* *Municipality/City* *Province* *Postal Code*

To The Applicant: Write the information needed above. Choose two persons who know you well and have held positions of authority over you in your present school: your class adviser or teacher or counselor. Give a copy of this form to each of these two persons. Provide each with an envelope.

To The Guidance/Subject Teacher: The person above is applying for admission in Montessori Integrated School. Please give your assessment carefully and fill out the form completely. Your assessment will be used to complete the evaluation of the student. After accomplishing this form, seal it in an envelope, sign across the flap and return to the applicant. Unsealed and unsigned recommendation letters will not be accepted. Thank you very much for your assistance.

A. **GENERAL ASSESSMENT**: How would you assess the applicant using the following criteria? Please place a check

		ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	NO CHANCE TO OBSERVE
Communication Skills	Oral				
	Written				
Mental Ability					
Consistency of Performance					
Motivation					
Social and Emotional Stability					
Study Habits and Attitudes					
Maturity					
Concern for Others					

B. To What **RANK** does the applicant belong in terms of academic performance? Please place a check mark in the box.

_____ **Number of Students in his/her class**
☐ Top 10% ☐ Top 25% ☐ Top 50% ☐ Below 50% of his/her class/section

_____ **Number of Students in his/her batch**
☐ Top 10% ☐ Top 25% ☐ Top 50% ☐ Below 50% of his/her batch level

C. **COMMENTS:** Would you have other comments, which may help the Committee decide on the intellectual strength and weaknesses, level of maturity, sense of service in school and/or community?

_____
_____
_____
_____

D. Please indicate by checking the appropriate box. If the applicant has been placed on probation during his/her stay in your school.
☐ Academic ☐ Disciplinary ☐ Absences

Please explain briefly: _____
_____
_____

E. **SUMMARY EVALUATION:** Please check (✓) one.
☐ I strongly recommend ☐ I recommend with reservation ☐ I recommend ☐ I do not recommend

PRINTED NAME: _____ SIGNATURE : _____
POSITION : _____ SUBJECT TAUGHT: _____
SCHOOL : _____ DATE : _____