



TEACHER RECOMMENDATION FORM (Entering K5-12th Grade)

Homeroom teacher for K5 ~ G5 and English teacher for G6 ~ G12

Please complete the information below, sign it, and send this form directly to KKFS.

Name of Student: _____ Grade applying for: _____

Name of Current School: _____ Present Grade: _____

The student above is applying for admission to Korea Kent Foreign School. Your candid insight will help the Admissions Committee in its evaluation of this applicant. We sincerely appreciate your assistance. All information shared is confidential.

Name of Evaluator: _____ Position: _____

Length of time acquainted with student: _____

How often do you have contact with this student? Daily ☐ Weekly ☐ Occasionally ☐

What is the student's first language?

What language is spoken at school?

Has the student ever attended any ESL/ELL classes to get additional help with English?

If so, in what year and how long did the student take the ESL/ELL class?

Describe any particular academic strengths, weaknesses, or learning issues, such as ADHD, and please explain.

What are the first words that come to mind when you describe this applicant?

Has the student received extra help during the school day? If so, how much and what kind of assistance was provided?



Does the applicant possess any special competence, talent, or potential for leadership?

Have you observed any behavioral or disciplinary concerns?

Please include additional information about the candidate's character, values, special interests, talents, performance, or overall potential as a student. If you feel the student's record is not a true indication of his/her ability, please explain:

Please check the appropriate boxes below to give your impressions of the student:

	No basis for judgment	Below average	Average	Good	Excellent
Academic potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading skill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Study habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship with teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conduct and behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Teacher's Name: _____ Teacher's Signature: _____ Date: _____

School: _____ E-mail: _____

Thank you for taking the time to complete this form.