



American Community School

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EDUCATIONAL
EXCELLENCE
SINCE
1955

Principal/Counselor Recommendation for Grades 6 – 12

Name of Applicant _____ Applicant for Grade _____

Parent or Guardian: Please write your child's name in the space above and read and sign the following before giving this to your child's counselor or principal. Please include an envelope to be sealed by the referee. I understand and agree that the information contained on this recommendation is confidential and will be used only in the selection of applicants. I also understand that this completed form will not be available to applicants, parents, or anyone outside the Admissions Committee. and I waive any right that I may have to see it.

Signature of Parent or Guardian _____ Date _____

Counselor/Principal: Please complete this form and return it in the enclosed envelope, by fax or e-mail. This Teacher Recommendation form will be treated confidentially and will not be shared with parents. Thank you for your cooperation and honesty. **The child's application cannot be processed until this form is received in our Admissions Office**

Name of person completing this form: _____

Position: _____ Email Address: _____

Please complete Candidates for grades 9 -12	No Basis for Judgment	Below Average	Average	Good	Excellent (Top 10%)
Ability to get along with other students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Politeness	<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"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect from peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Study habits and organizational ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseverance under pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. Describe any particular area of academic strength or weakness: _____

2. Does the candidate have any learning needs requiring special support? Please be specific:

3. Has the candidate, in any way, been a disciplinary problem? If so, Please explain:



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4. What interest do the candidate's parents show in his/her activities and studies? _____

5. Summary statement – Please write a summary statement assessing in a specific terms as possible the candidate's quality and promise as a student and person. We are particularly interested in evidence about character, relative maturity, values, and special interest or talents. If the candidate's record is not a true indication of his/her ability, please explain factors that have contributed to his /her academic achievement.

I recommend this candidate for the American Community School: (Please check one)

	Not recommended	Without Enthusiasm	Fairly Strongly	Strongly	Enthusiastically
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you checked "not recommended" or "without enthusiasm", please explain:

Date _____

Signature _____

Please mail, fax or e-mail this form directly from your school to:

PO Box 310 Dahiat Al Amir Rashid, Amman 11831 Jordan

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