

Via di Villa Lauchli 180 - 00191 Rome, Italy
Telephone (06) 3629101 Facsimile (06) 36301738
e-mail: admissions@marymountrome.org

RECOMMENDATION FORM
Counselor
Principal

Name of the applicant: _____ Applying for Grade _____

School address: _____

To the applicant: Please give this form to your Counselor/Principal and ask him /her to complete and return it with the completed teacher recommendation forms and a copy of your school records to Marymount International School Admission Office.

To the counselor/Principal: The student whose name appears above is applying for admission to Marymount International School. Your candid assessment of this student's intellectual and personal qualities is important to the Board of Admission in making its selection of suitable applicants. All information submitted will be held in the strictest confidence. Please mail or fax directly to Marymount school together with the teacher recommendation forms.

1. How long have you known this applicant? _____

2. Please give your view of this applicant's academic ability to complete successfully a college preparatory program:

3. Will this applicant be able to undertake a full program of studies taught in English?

4. Please give details of this applicant's participation in extra curricular activities: _____

5. Please check the boxes below on how you would rate this applicant's character and personality:

No basis
for a
rating

Excellent
(top 10%)

Very good
(well above average)

Good
(above average)

Average

**Below
average**

Poor

	No basis for a rating	Excellent (top 10%)	Very good (well above average)	Good (above average)	Average	Below average	Poor
Relationship with other students							
Relationship with teachers							
Maturity							
Work ethic							
Integrity							
Self-discipline							
Energy							
Self-confidence							
Warmth of personality							
Sense of humor							
Concern for others							
Reaction to criticism							
Academic potential							
Leadership							

Over...

6. Has disciplinary action been taken against this applicant? Yes _____ No _____

If yes, please explain:

7. Has the applicant ever been suspended or expelled? Yes _____ No _____

If yes, please explain: _____

8. Does this child have any special needs? _____

9. We welcome any information you can give us about this student "as a person". Description of both strengths and weaknesses are helpful, as are any specific examples of special personal qualities or talents. Please feel free to offer any additional comments you think may be helpful to the Board of Admission. _____

Name of Counselor/Principal: _____ Signature: _____

School: _____

Telephone: _____ e-mail: _____

Date: _____

We are extremely grateful for your assistance and thank you for giving your time to this matter.