



# Cebu International School

Pit-os, Cebu City, Philippines 6000  
 (032) 261-0247 | cis.edu.ph

## RECOMMENDATION FORM

*(for Grades 9 to 10 Applicants)*

Name of Applicant: \_\_\_\_\_ Grade Level Applied: \_\_\_\_\_

**To whom it may concern:**

We wish to inform you that the child named above is seeking admission to the Cebu International School, Pit-os (CIS), Cebu City, Philippines. CIS offers courses from Preschool 3 to Grade 12. Please complete this form, seal in an envelope and hand it to the parent/guardian. You may also scan and e-mail to [registrar@cis.edu.ph](mailto:registrar@cis.edu.ph), or fax to telephone number 63-32 261-0247 EXT 217.

Thank you very much for your cooperation and assistance.

*The School Registrar*

I – Please tick the box that best describes the student.

**Key: E=Excellent; G =Good; S=Satisfactory; B=Below minimum requirement; NA=Not Applicable**

	Excellent	Good	Satisfactory	Below Min Requirement	Not Applicable
<b>ORGANIZATION</b>					
Prepared for class: necessary materials					
Follows instructions					
Uses time effectively					
Meets deadlines					
Maintains organized and useful notes					
Punctual					
Reviews course material					
<b>COMMUNICATION</b>					
Listens with focus					
Asks questions to enhance learning					
Expresses ideas orally					
Expresses written ideas					
Presents using a variety of methods					
Uses APA citation					
Writing: proof-reads work					
<b>TRANSFER</b>					
Cooperates effectively in a team					
Uses inquiry strategies					
Uses problem-solving strategies					
Demonstrates research skills					
Makes connections					
ICT Skills					
<b>PERSONAL LEARNING</b>					
Shows initiative					
Shows positive attitude to learning/self-motivated					
Uses reflection to improve learning					
Responsible					

Respectful					
Is prepared to be a risk-taker					
Works independently					
Submits neat work					
Uses criteria descriptors as a guide to learning					
Uses technology wisely					

**II – Personality Traits. Please circle the word/s that best describes the student.**

- |                 |                 |                |                  |                    |
|-----------------|-----------------|----------------|------------------|--------------------|
| Assertive       | Anxious         | Articulate     | Self disciplined | Easily discouraged |
| Confident       | Conscientious   | Disobedient    | Follower         | Manipulative       |
| Helpful         | Honest          | Influential    | Irritable        | Passive-aggressive |
| Motivated       | Negative leader | Over-protected | Perfectionist    | Cheerful           |
| Positive leader | Responsible     | Self-centered  | Shy              |                    |
| Social          | Vivacious       | Well-liked     | Other: _____     |                    |

**III – Kindly answer the following questions briefly:**

- How long have you known this student? \_\_\_\_\_
- Is the student eligible for promotion to the next grade level? \_\_\_\_\_
- Is the student involved in extra activities in school, such as:  
 production     band     choir     sports/varsity or school teams  
 Yearbook     Student Council    \_\_\_\_\_  
other, please specify: \_\_\_\_\_
- Does this applicant have any outstanding abilities or significant limitations that impact school performance?  
 yes;     no Please explain below:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Please comment on this student’s reading and writing skills (consider reading comprehension, vocabulary, grammar, mechanics and creativity)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- What Math course is this student enrolled in? \_\_\_\_\_  
What level of course:  Remedial  Regular  Advanced  Advanced Ability  
What is the suggested math placement for next school year? \_\_\_\_\_
- Are you aware of any additional learning or behavioral support that has been provided to this student or if a condition exists so that it may be required? (IEP, learning disability, counseling, etc.)  yes;     no Please explain below:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Additional comments about this child's strengths and weaknesses, learning style, social skills, an/or personal qualities:

---

---

---

---

9. Has this student been involved in any major disciplinary action at your school? (e.g. suspension and other serious offences) Please cite incidents.

---

---

---

---

**IV – Please provide copies of any professional assessments.**

May we contact you for further information?     Yes     No

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Contact Information:

E-Mail: \_\_\_\_\_ Landline/Mobile Phone No. \_\_\_\_\_

\_\_\_\_\_  
Signature/Date Signed

*Affix school  
seal here*