



EVEREST ACADEMY NUVALI RECOMMENDATION FORM

To Student's parents: Give this form to your child's most recent Principal, Guidance Counselor, or Teacher.

Name of Student

Current grade

Level being applied for

To the Principal, Guidance Counselor, or Teacher: The information that you share in this form will help us effectively evaluate the application of the student named above and will be kept in strict confidence. Please submit a scanned copy of the completed form directly to admin@everestnuvali.edu.ph. Thank you for your assistance.

Your name _____ Position/Title _____

School _____

Email address _____ Contact number _____

If we have additional questions, may we call you? Yes, the best time to call is: _____ No

Signature _____ Date _____

School serves grades _____ to _____ Month your school year begins: _____ ends: _____

Curriculum or educational approach your school implements:

Philippine DepEd American IB Cambridge Other: _____

Your school's minimum passing grade: _____ %

Applicant's academic ranking in the current level Top 10% Top 25% Middle 50% Lower 25%

How long have you known the student? _____

How well do you know the student? Very well A little Not at all

What are the first three words that come to mind to describe this student?

1. _____ 2. _____ 3. _____

Overall recommendation of this student based on academic potential:

Highly recommended Recommended With reservation Not recommended

Overall recommendation of this student based on character/behavior/attitude:

Highly recommended Recommended With reservation Not recommended

	Above Average	Average	Below Average	Comments
Learning Skills				
Oral Communication				
Written Communication				
Fine Motor				
Gross Motor				
Motivation/Effort				
Independence				
Attentiveness/Staying on task				
Following directions				
Social and Emotional Skills				
Self-confidence				
Relationship with peers				
Interaction with teachers/adults				
Maturity				
Self-control				
Cooperation/Working with others				
Responsibility in following rules				

<p>Has the student been involved in any disciplinary case? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please provide details:</p>
<p>Have you observed any signs of learning difficulties or challenges in terms of social interaction? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please provide details:</p>
<p>Are you aware of any family circumstances that affect the student's life and attitude in school? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please provide details:</p>
<p>Please share any additional information that can be valuable in this evaluation.</p>