

Rotary District

Long-Term Exchange Program

Section G: Secondary School Personal Reference

Student: Complete the top section of this form, then give the form and a stamped envelope, preaddressed to the Rotary club or district to which you are submitting your application, to a teacher or administrator who knows you and your abilities and accomplishments at school. By so doing, you give permission to that individual to release this information to the Rotary club/district Youth Exchange committee for their review.

	Male Female							
Applicant's Full Legal Name				Gender Date of Bi			Birth (e.g., 01/Jan/1999)	
Address								
Address — Street								
City			State/Province		Postal Code		Country	
Iome Phone Mobile Phone			E-mail					
Evaluator: This student is applying this form within seven days of receipt quired by law.								
1. Ratings								
Area	Excell	ent	Good	Average	Below A	Average	No Basis to Rate	
Creative, original thought								
Independence, initiative								
Intellectual ability]		
Emotional stability								
Academic achievement]		
Openness to new ideas]		
Flexibility, adaptability]		
Ability to communicate]		
Potential for growth								
Disciplined habits]		
Participation]		
2. Do you believe the applicant has learning a foreign language?3. Do you believe the applicant's p Please use the reverse side of the ability as an exchange stude	☐ Yes ☐ No arents/legal guardians is form to explain you	s support r answers	his/her wish to spen	d time abroad?	☐ Yes ☐] No □ 1	Not Sure	
RECOMMENDATION								
I recommend this student as a future	e Rotary Youth Exchan	ige studen	t (check one):					
Strongly Recommend	Recommend	No Opii	nion Do No	t Recommend	Stron	gly Do No	ot Recommend	
Name and Title (type or print) Signature		(in blue ink) Date				(e.g., 01/Jan/2006)		
Name of School		Phone E	-mail					

DO NOT RETURN THIS FORM TO THE STUDENT.

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