



METROPOLITAN SCHOOL *of* PANAMA

TEACHER RECOMMENDATION FORM For Students Applying to 1st - 12th Grade

Full name of Applicant: _____ Age: _____ Current Grade: _____

This form is a requirement for admission consideration at the Metropolitan School of Panama and is to be completed by the applicant's current teacher. Teachers may e-mail the form directly to admissions@themetropolitanschool.com or send it with the parents in an sealed envelope stamped with the school seal. Please note that the child's application can not be processed until this form is received by our Admissions Office.

Note to the Teacher: This teacher recommendation form will be treated confidentially and will not be shared with parents. Thank you for your cooperation and honesty. Your feedback is greatly appreciated.

Name of School: _____ How long have you known the student? _____

Is this school an IB World School? ☐ Yes ☐ No

Which IB Program is offered? ☐ PYP ☐ MYP ☐ DP

If the school is not IB, which curriculum is offered? _____

Please rate this applicant on the following characteristics, if applicable.

S = Superior AA = Above Average A = Average B = Below Average N = No Basis for Judgement

Area of Development	S	AA	A	B	N
Gets along with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respects others' rights and property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enters new activities enthusiastically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperates with classmates and teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listens attentively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accepts and follows through on suggestion for improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shows leadership qualities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes part in class discussions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates self-confidence/positive self-image	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exhibits self-control in the classroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accepts responsibility for own action and mistakes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses time wisely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completes class work in reasonable amount of time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completes homework assignments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is enthusiastic about learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shows organization and planning skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands concepts and materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Expresses feelings appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses classroom materials responsibly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



What are the applicant's areas of strength?

In what areas does the applicant need to improve?

What are three words you would use to describe this applicant?

1. _____ 2. _____ 3. _____

Please describe any notable social, behavioral or emotional concerns. What steps have been taken to address them?

Has the child received or has been recommend to receive additional support in the following areas?

- ☐ Speech Therapy ☐ Physical Therapy ☐ Sensory Therapy ☐ Occupational Therapy
☐ Conduct Therapy ☐ Family Counseling ☐ Individual Counseling

Please elaborate if any of the boxes above are checked. How long has the student received services?

Please describe any notable physical, visual or auditory concerns:

How would you rate the level of the applicant's English Proficiency?

- ☐ Beginner ☐ Lower Intermediate ☐ Intermediate ☐ Upper Intermediate
☐ Advanced ☐ Near Native ☐ Native Fluency

Please complete this section if the applicant's first language is not English, otherwise please continue to the next page.

Student's Native Language: _____

Which of the following statements do you feel would be most appropriate for this applicant?

- ☐ This student could be completely mainstreamed for all academic classes and need no additional English support
☐ This student could cope with most mainstream academic classes but would need additional English support
☐ This student is not yet ready for mainstream academic classes in English and should be in classes specially designed for students learning English
☐ This student is a beginner and requires extensive English support in all areas



Is the applicant habitually tardy or absent?

☐ No ☐ Yes Number of absences: _____

Is the family supportive of the policies of the school?

☐ No ☐ Yes

Is there anything of note regarding the family of the applicant that our Admissions Office should know?

☐ No ☐ Yes, explain: _____

Is there information that would be better conveyed in a phone conversation?

☐ No ☐ Yes, number we may contact you to: _____

Do you recommend this student for admission at the Metropolitan School of Panama?

☐ Without reservation ☐ With reservation ☐ Not at all

Additional Comments: _____

Will you be willing to discuss this applicant by telephone if we have further questions?

☐ No ☐ Yes. Please include a phone number where we may contact you: _____

Full name of teacher completing this form(print): _____

Grades Taught: _____

Subjects Taught: _____

E-mail Address: _____ Phone number: _____

Signature of teacher: _____ Date: _____

School Seal