## **Yongsan International School of Seoul**

Truth \* Excellence \* Diversity



## Teacher Recommendation Form (Entering Kindergarten - Grade 1)

Name of Applicant:		Applying for Grade:		
Date of Birth:		Present Grade:		
	Dear Teacher: The child above is applying for ac Your candid insight will help the Admissions Com appreciate your assistance. <b>All information sha</b>	mittee in its evaluation of this applicant. We sincerely		
PART	<b>I</b> —Please check the <b>most</b> appropriate descri	ptor for this child.		
A.	Attention Span	E. Confidence		
	☐ Is able to focus and maintain attention	☐ Very sure of self		
	over time  Attends with occasional teacher redirection	Confident with the familiar; attempts new things with encouragement		
	☐ Easily distracted and requires frequent	Reluctant to try new or difficult things		
	teacher redirection	☐ Very uncertain; needs much encourageme		
В.	Task Persistence	F. Attention to Directions		
	Persists and completes tasks independently	Listens carefully to entire directions		
	☐ Attempts task, with some encouragement	Attends only to brief directions		
	$\hfill \square$ Attempts task, after much encouragement	Plunges ahead after hearing only a portion		
	Refuses to attempt or complete task	of directions		
C.	Degree of Independence	G. Relationships		
	☐ Able to work independently	☐ Works and plays well with others		
	☐ Requires occasional assistance	Friendly, but reserved		
	Requires frequent assistance	☐ Has difficulty interacting with peers		
	☐ Needs constant supervision or guidance	☐ Has difficulty interacting with adults		
D.	Body Movement at Listening Times			
	☐ Sits quietly with self control			
	☐ Some squirming			
	☐ Much movement			
	☐ Body constantly in motion; out of seat			
PART	II —Please evaluate this child with regard to	his/her overall school readiness.		
Gr	oss Motor Development	Fine Motor Development		
	Delayed   Age Appropriate   Advanced	☐ Delayed ☐ Age Appropriate ☐ Advanced		
Re	ading/Reading Readiness	Math/Math Readiness		
	Delayed   Age Appropriate   Advanced	☐ Delayed ☐ Age Appropriate ☐ Advanced		

## PART III— Please check the appropriate response.

Child's Language	Excellent	Good	Fair	Poor
Speaks clearly				
Speaks in complete sentences				
Expresses and communicates ideas clearly				

Parents	Excellent	Good	Fair	Poor
Are cooperative				
Have reasonable expectations of school				
Follow through with school's suggestions				
Have realistic picture of child's abilities				
Are consistent with discipline				
Get along well with other parents				

## **PART IV**

1.	Please comment on the individual strengths or special abilities of this child.				
2.	Are there activities that appear difficult	for this child?			
3.	. What behavioral difficulties, if any, has the child demonstrated?				
4.	What is the child's first/strongest langu	age?			
5.	How long have you known this child? _				
Te	acher's Name (Please print)	Teacher's Signature	Date		
School		School Website			

Thank you for your time and assistance.

Please mail or fax this form directly to:
OFFICE OF ADMISSIONS
Yongsan International School of Seoul
San 10-213, Hannam dong, Yongsan gu
Seoul, S. Korea 140-210

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