

# THE BRITISH INTERNATIONAL SCHOOL OF NEW YORK

MANHATTAN

## TEACHER RECOMMENDATION FORM: RECEPTION/PRE-KINDERGARTEN AND YEAR 1/KINDERGARTEN

### To the parent/s of the applicant:

Please fill in, and sign this form and send it to your child's present school. A completed report is a necessary part of your application to The British International School of New York.

I hereby authorize you to send school reports for my child:

Name of applicant: \_\_\_\_\_

To:

**Admissions Office**  
**The British International School of New York**  
**20 Waterside Plaza**  
**New York, New York 10010**

I understand that the Teacher Recommendation Form is confidential between the sending school and The British International School of New York and will be used only for purposes of admission.

Signature of Parent \_\_\_\_\_ Date \_\_\_\_\_

### To the teacher of the applicant:

Thank you for taking a few moments to fill in this form. Your comments will help us ascertain whether this applicant is a good fit with The British International School of New York. This form will become part of the student's admission file and will remain confidential. Please return the form as soon as possible.

The British International School of New York is unique in offering the rigor of the English National Curriculum and the enthusiasm and enquiry based learning approach of the IB Primary Years Program. We offer admission to children that we feel will flourish educationally and emotionally in the safe, nurturing environment we provide. If you have any questions, please email the Admissions Office at [Admissions@bis-ny.org](mailto:Admissions@bis-ny.org). You can also find out more about us by visiting our website [www.bis-ny.org](http://www.bis-ny.org).

Thank you for your assistance!

Name of student:

Date of birth:

Street Address:

Home Phone Number:

Apt:

Mobile Phone Number:

City:

Proposed entrance date / year:

State:

Date of this report:

Country/Postal Code:

Submitted by:

Zip / Postal Code:

Present School/Teacher and class:

How long have you known this child?:

Languages spoken at home:

Any other languages:

Dominance (please circle): Right/ Left/ Not yet established

Please check the box which most accurately describes the student:

	Area of Strength	Age Appropriate	Progressing to Age Appropriate	Area of Concern
<b>PHYSICAL DEVELOPMENT</b>				
Draws with details				
Uses appropriate grip				
Works with manipulatives				
Sense of body in space				
Gait, fluidity, smoothness of movement				
<b>INTELLECTUAL SKILLS AND DEVELOPMENT</b>				
Follows directions given to a group				
Follows directions given individually				
Follows multiple step directions				
Comprehends stories when read aloud				
Participates in classroom discussion				
Memory retention				
Clarity of speech				
Fluency of expression				
Vocabulary				
Ability to stay on discussion topic				
Appropriate syntax				
Relates sequentially				
Sound-symbol correspondence				
Recognizes letters-upper case				
Recognizes letters-lower case				
Recognizes numerals				
Understands one-to-one correspondence				
Can write numerals				
Understands comparative terms (size, time)				

Recognizes shapes				
<b>SOCIAL/EMOTIONAL DEVELOPMENT</b>				
Self-esteem				
Acceptance of limits				
Self-motivation				
Interaction with peers				
Interaction with adults				
Resolves conflicts appropriately				
Separation from parents/caregivers				
Respect for personal property				
Respect for the property of others				
Accepts responsibility for actions				
Sense of humor				
Curiosity				
Attention span				
Cooperation				
Leadership skills				
Ability to follow peers				
Makes transition easily				
Accepts change				
Comfort with large group				
Comfort with small group				
Comfort alone				

**Usually chooses (please circle):** Large group/ Small group / Alone

**Usually takes role of (please circle):** Leader/ Follower/ Varies

**2. Please describe any notable physical strengths or weaknesses: visual, motor, auditory (including frequency of ear infection), and comment on general health, including level of absenteeism.**

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**3. Please comment on the child’s language and speech development. Has the child been recommended for speech or language evaluation or therapy? (Please specify)**

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**4. Please comment on the child’s ease of learning and ability to make meaningful connections.**

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5. Please comment on the child's social/emotional development.

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6. Please describe the child's work habits: pace, perseverance, independence, problem-solving, ability to work to completion, and attitudes.

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7. Family: Is there anything significant about the home life which will help us to understand this child? (new baby, move, divorce/separation)?

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Have all financial obligations been met?

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Have you received active cooperation from the parents?

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Please describe the parents' involvement with the school.

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What adjectives come to mind to describe this applicant?

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In relation to boys and girls of the same age that you know, and using the scale below, how would you rate this student?

	Excellent	Good	Average	Weak
For academic promise				
For character and personal promise				
Overall Recommendation				

**Additional comments:**

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**Signed:**

**Date:**

**Title:**

**Telephone/E-mail:**