

## MATHS TEACHER'S CONFIDENTIAL REPORT: IB DIPLOMA PROGRAMME

Parents should ask the student's current Maths Teacher to complete this form.

*THIS INFORMATION SHOULD BE PROVIDED BY THE CANDIDATE.*

Student's surname: \_\_\_\_\_ Student's first name: \_\_\_\_\_  
*(please use capital letters)*

Grade /  Year enrolled: \_\_\_\_\_ School name: \_\_\_\_\_

School address: \_\_\_\_\_

Dear Teacher,

The student whose name appears above is applying for admission to ICS Paris. This assessment is an important part of the application and your cooperation in providing a full report will be greatly appreciated. Parents should not have access to this confidential report – once completed, please send directly to [admissions@icsparis.fr](mailto:admissions@icsparis.fr).

How long have you known this student and in what context?

Please indicate the type of educational curriculum or academic programme this student follows at your school:

Please list the courses you have taught this student, noting the level of achievement:

What is the main language of instruction in the class?

Compared to other students in his / her class, how do you rate this student?

INDICATOR	NO BASIS	BELOW AVERAGE	AVERAGE	GOOD	VERY GOOD	EXCELLENT	OUTSTANDING
Creative, original thought	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Motivation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Intellectual ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Academic achievement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Written expression of ideas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Effective class discussion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disciplined work habits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

We welcome any **additional comments** you think might be helpful to us, including special interests or talents, and special educational or emotional needs.

Name and position of person completing this form:

\_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ School stamp: \_\_\_\_\_

\_\_\_\_\_

Please return this completed form directly to:  
 ICS Paris - International School - Admissions  
 23 rue de Cronstadt, 75015 PARIS - France  
 Telephone: +33 (0)1 56 56 60 31  
 Email: [admissions@icsparis.fr](mailto:admissions@icsparis.fr).