Confidential Student Reference Form

■ admissions@cis.ky | (€) +1 (345) 945-4664 | (⊕) www.cis.ky



Parents / Guardians										
Please complete this top portion before sharing the form with your child's school.										
Student Name		Date of Birth (m/d/y		Current Grade						
Parental Authorization: As part of the application process to Cayman International School, I hereby authorize the release of information regarding my child (named above) to be made to Cayman International School.										
Present School	Date of Entry									
Parent Signature	Today's Date									
School Principal, Counselor, or Classroom Teacher										
The student named above has applied to Cayman International School. The information below is required as part of the application process. Please complete pages one and two, and return to Cayman International School via email: admissions@cis.ky. The information will be kept in strict confidence. How long have you known this student and in what capacity?										
Answer the questions below by using the scale provided										
How supportive and cooperative are the student's parents?										
Not Supportive / Cooperative	1 2	3	4	5	Extremely Supportive / Cooperative					
How well does the student	get along with their p	eers?								
Not well	1 2	3	4	5	Very Well					
How respectful is this stude	ent towards his peers,	teachers, aı	nd their env	vironment?						
Not Respectful	1 2	3	4	5	Very Respectful					
	Student	Academic Ba	ackground							
 Does this student receiv Does this student currer Does this student have a Are they currently receiv If yes to any of the abov 	ntly have an IEP (Individu a Psychological Report or ing English as an additio	r has one bee nal language	n requested support?	_	Yes No No Yes No Yes No Yes No					



Follows DirectionsImage: Second S	Please indicate the student's level of social/emotional development below									
Follows Directions Image: Signature Sign		Unknown	Below Average	Average	Above Average	Excellent				
Completes TasksImage: state s	Attention Span									
Self ConfidenceImage: Self Confidence	Follows Directions									
Accepts Consequences Image: Signature Signature Signature Signature School official (Principal Signature Signa	Completes Tasks									
Displays Good Manners / Kindness i<	Self Confidence									
Collaborates well with all peers i<	Accepts Consequences									
Receptive to feedback Image: Standing Image: Standing Image: Standing Average Average Above Average Excellent Current Overall Academic Standing Image: Stand	Displays Good Manners / Kindness									
Please Indicate the student's lawarage Average Average Above Average Excellent Current Overall Academic Standing Image: Standin	Collaborates well with all peers									
UnknownBelow AverageAverageAbove AverageExcellentCurrent Overall Academic StandingImage: Standing ComprehensionImage: Standing ComprehensionMathematicsImage: Standing ComprehensionImage: Standing ComprehensionImage: Standing ComprehensionImage: Standing ComprehensionImage: Standing ComprehensionStanding ComprehensionImage: Standing ComprehensionImage: Standing ComprehensionImage: Standing ComprehensionImage: Standing ComprehensionAdditional Comments:Image: Standing ComprehensionImage: Standing ComprehensionImage: Standing ComprehensionImage: Standing ComprehensionVould you be willing to discuss this child by phone in two have further questions ?Image: YesImage: NegStanding ComprehensionImage: Standing ComprehensionImage: Standing ComprehensionImage: Standing ComprehensionNameImage: Standing ComprehensionImage: Standing ComprehensionImage: Standing ComprehensionImage: Standing ComprehensionName<	Receptive to feedback									
Unknown Below Average Average Above Average Excellent Current Overall Academic Standing Image: Standing Comprehension Image: Standing Co	Please indicate the student's level of academic performance below									
Reading Comprehension Image: Second Se		Unknown	Below Average	Average	Above Average	Excellent				
Verbal Ability Image: Statistic stat	Current Overall Academic Standing									
Writing Skills Image: Skills Mathematics Image: Skills Classroom Participation Image: Skills Classroom Participation Image: Skills Study Habits Image: Skills Motivation to Learn Image: Skills Organization Image: Skills Attendance Image: Skills Attendance Image: Skills Mould you be willing to discuss this child by phone if we have further questions? Yes Name Signature Position Image: Skills Date Image: Skills	Reading Comprehension									
Mathematics Image: Second Participation Classroom Participation Image: Second Participation Study Habits Image: Second Participation Motivation to Learn Image: Second Participation Organization Image: Second Participation Attendance Image: Second Participation Additional Comments: Image: Second Participation Would you be willing to discuss this child by phone if we have further questions? Yes Name Signature Position Date	Verbal Abillity									
Classroom Participation Image: Signature Study Habits Image: Signature Motivation to Learn Image: Signature Organization Image: Signature Attendance Image: Signature Mould you be willing to discuss this child by phone if we have further questions? Yes Name Signature Position Date	Writing Skills									
Study Habits Image: Study Habits Motivation to Learn Image: Study Habits Organization Image: Study Habits Attendance Image: Study Habits Additional Comments: Image: Study Habits Image: Study You be willing to discuss this child by phone if we have further questions? Yes Name Signature Position Date	Mathematics									
Motivation to Learn Organization Attendance Additional Comments: Vould you be willing to discuss this child by phone if we have further questions? Yes Name Position Date	Classroom Participation									
Organization Attendance Additional Comments: Mould you be willing to discuss this child by phone if we have further questions? Yes Name Position Date Date	Study Habits									
Attendance Additional Comments: Would you be willing to discuss this child by phone if we have further questions? Yes No School official (Principal, Counselor, or Classroom Teacher) completing this form Name Position Date Date	Motivation to Learn									
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Name Signature Position Date	Would you be willing to discuss this child by phone if we have further questions? Yes No									
Position Date										
Position Date	Name		Signatur	re						
			_ _							
Email Phone	Position		Date							
	Email		Phone							
School Name	School Name]				
School Address City: Country:			City		Country:]				

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