

English Teacher Recommendation

	To the student: Please read the statement below and sign:							
	I waive my right to read this confidential teacher recommendation and understand that	t if I violate th	e confidential	ity of this recommendation,				
	my application might not be processed by the AIS-Salzburg admissions committee.							
	Signature: Date:							
7	To the English Teacher							
	This student recommendation and evaluation will be kept strictly confidential. Student	applicants to	the Americar	n International School-Salzburg				
8	and their parents will not have access to this information. This information will not affect	t the student	's permanent	record; it is for admissions pur-				
ķ	poses only. We thank you for your honest and valuable assistance in filling out this form	n.						
١	Name of person submitting this recommendation:							
7	Title and position:	····						
1.	Title of course in which you teach this student:							
2.	2. How often does the course meet? 3. What te	e course meet? 3. What textbook is used?						
4.	What is the student's average percentage grade?							
5.	5. Please estimate the percentage of time spent in the following areas:							
	Reading/literature Vocabulary Grammar		W	riting skills				
6.	6. What are the first three words that come to mind to discribe this student in an acade	mic setting?						
	a b	C						
7.	7. What would you say are the student's strengths in English?							
8.	3. In which areas does the student have room for growth?							
9.	Does the student attend classes regularly?	_ yes [no 🗌	If no, please explain below				
	Is there a problem with tardiness?	_ yes _	no 🗌	If yes, please explain below				
10.								

	Please rate the student in the follo	wing areas:					
		Outstanding	Excellent	Good	Average	Below Average	No basis for Judgement
1.	Study habits						
2.	Intellectual curiosity						
3.	Grammar background						
4.	Self-directedness						
5.	Self-discipline						
6.	Attentiveness						
7.	Accepting criticism						
8.	Imagination						
9.	Creativity						
10.	Confidence						
11.	Leadership ability						
12.	Maturity						
	Additional Commentary						
	Please feel free to add further information	ation which may b	oe of assistanc	e to us in proc	essing this stu	ident's application:	
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_							
of the	y signature below, I consent to allow the administra e applicant. I understand that the personal data pro pean Union (GDPR 2016/679).	ation of AIS-Salzburg to ovided on this form will I	collect, store, and be handled within th	process this person ne restrictions and p	nal data with the ag privacy protection p	greement of the applicant a parameters of the General	and the parents or legal guardians Data Protection Regulations of the
Tea	cher Signature:		Г	Date:			

Student's Name

English Teacher Recommendation, page 2

Please return this form to: