



american international school
SALZBURG · AUSTRIA

Mathematics Teacher Recommendation

Applicant's Name _____

To the student: Please read the statement below and sign:
I waive my right to read this confidential teacher recommendation and understand that if I violate the confidentiality of this recommendation, my application might not be processed by the AIS-Salzburg admissions committee.
Signature: _____ Date: _____

To the Mathematics Teacher

This student recommendation and evaluation will be kept strictly confidential. Student applicants to the American International School-Salzburg and their parents will not have access to this information. This information will not affect the student's permanent record; it is for admissions purposes only. We thank you for your honest and valuable assistance in filling out this form.

Name of person submitting this recommendation: _____

Title and position: _____

1. Title of course in which you teach this student: _____

2. How often does the course meet? _____ 3. What textbook is used? _____

4. What is the student's average percentage grade? _____

5. Please estimate the percentage of time spent in the following areas:

Geometry _____ Algebra _____ Trigonometry _____ Calculus _____

6. What are the first three words that come to mind to describe this student in an academic setting?

a. _____ b. _____ c. _____

7. What would you say are the student's strengths in mathematics? _____

8. In which areas does the student have room for growth? _____

9. Does the student attend classes regularly? _____ yes no If no, please explain below.

10. Is there a problem with tardiness? _____ yes no If yes, please explain below.

11. Does the student turn in homework regularly and on time? _____ yes no If no, please explain below.

Please rate the student in the following areas:

	Outstanding	Excellent	Good	Average	Below Average	No basis for Judgement
1. Study habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Intellectual curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Grammar background	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Self-directedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Self-discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Attentiveness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Accepting criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Imagination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Leadership ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Commentary

Please feel free to add further information which may be of assistance to us in processing this student's application:

By my signature below, I consent to allow the administration of AIS-Salzburg to collect, store, and process this personal data with the agreement of the applicant and the parents or legal guardians of the applicant. I understand that the personal data provided on this form will be handled within the restrictions and privacy protection parameters of the General Data Protection Regulations of the European Union (GDPR 2016/679).

Teacher Signature: _____ Date: _____