

By asking the applicant's school to complete and submit this form to ISL, the parents grant their explicit consent to ISL's receiving and processing their personal information, and to ISL contacting the school if further questions arise.

Teacher Recommendation Form Applicants for Grades 7 – 11

To be complete	d, signed and	returned	to ad	<u>missions</u>	<u>@islux.lu</u>	by the	applicant's I	English or Social Studies Teacher
Name of Studer	nt					Curr	ent Grade L	evel
offering girls a	and boys in l Luxembourg.	Preschool Your rec	throu omme	igh Grad	e 12 an o is an impo	educatio ortant pa	nal progran art of our ev	e and university preparatory day school nme of excellence in the international valuation and placement of this student, al qualities.
	ded us is inva	luable. S						our time and effort. The information that ning the student, we hope that you will be
Date :		_						
ACADEMIC	WORK							
How long have	you known t	his applic	ant an	d in wha	t capacity	?		
_								the following areas:
ACADEMIC		,	,		, _F			
	Truly Outstanding	Excellent	Good	Average	Below Average	Poor	Insufficient Evidence	
Reading Ability								
Writing Ability								
Study Habits								
Enthusiasm								
Achievement								
Creativity								
PERSONAL Q	UALITIES							
	Truly Outstanding	Excellent	Good	Average	Below Average	Poor	Insufficient Evidence	
Integrity								
Conduct								
Reaction to Criticism								
Respect for Others								
	Truly				Below		Insufficient	



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*	Outstanding	Excellent	Good	Average	Average	Poor	Evidence				
Enthusiasm for Learning											
Leadership											
Peer Compatibility											
Sense of Humor											
Self Esteem											
Organisation											
RECOMMENI	DATION										
I recommend this candidate for admission to the International School of Luxembourg											
	Enthusiast	ically Str	ongly		Fairly Strongly		Without Enthusiasm	Not Recommended			
For academic promi	se 🗆										
For personal promis	e 🗆										
Over-all recommend	lation										
Additional Comments regarding the academic and personal qualities of this student:											
Your Name (please print) Position, Title School School Address											
Signature: School Telephone () Official school stamp:											