



Academy Way, Kelowna, BC V1V 3A4
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ABERDEENHALL.COM

Student's Name: _____ Current Grade: _____

Teacher's Name: _____ Current School: _____

Relationship to Student (homeroom, subject, coach, etc.) _____

As parent(s) of the above named student, we/I authorize his/her teacher to complete the following form on behalf of our/my child. We/I understand that the teacher will complete the form and email it directly to the Admissions Office. We/I understand that this form will be kept in strictest confidence by the Aberdeen Hall Preparatory School Office & Admissions Committee.

Parent Name(s): _____

Parent Signature(s): _____

Date(s) _____

dd/mm/yyyy

dd/mm/yyyy

To the Teacher:

The above student has made application to Aberdeen Hall Preparatory School. As part of the Admissions process, the following form must be completed. We would be grateful if this confidential form could be completed and emailed to the International Admissions Co-ordinator, Elaine Crebo at elaine.crebo@aberdeenhall.com. Thank you very much for your time.

	Excellent	Good	Satisfactory	Needs Improvement
Literary Comprehension				
Numeric Comprehension				
Class Participation				
Attention Span in Class				
Timely Completion of Assignments				
Relationship with Peers				
Cooperation with Teachers				
Citizenship				
Extra-curricular Participation				
Artistic Ability				
Musical Ability				
Athletic Ability				
Parental Support				



What words best describe the student?

Student Academic Strengths:

Student Academic Weaknesses:

Does the student participate in any support or enrichment programs?

Are there any areas where the student really shines?

Are there any areas where the student may require additional help or encouragement?

Is the student an enthusiastic participant in school programs (clubs, athletics, arts etc.?)

Is the student frequently late or absent from school?

Have there been any disciplinary incidents that have occurred during the student's enrolment at your school?

Teacher Name: _____ Teacher Signature: _____

Date: _____