



Seoul International School

Songpa P.O. Box 47 Seoul, Korea 138-600

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www.siskorea.org

Elementary School Recommendation Form (Gr. 3~5)

Student Name: _____ Date of Birth: _____ Gender: M / F

Name of the Evaluator: _____

School and Position: _____

Phone: _____ Fax: _____

E-mail Address: _____

Assessment Areas	Weak	Adequate	Excellent
Parental support & involvement			
Takes risks			
Respects other people & property			
Asks questions & seeks help when needed			
Motivation & attitude towards learning			
Creativity			
Critical thinking skills			
Follows oral and written directions			
Listens attentively when others are speaking			
Participates in class discussions			
Works well in groups			
Works well independently			
English Speaking ability			
Demonstrates self discipline			
Observes school rules			
Stays on tasks			
Prints and writes legibly			
accepts responsibility for belongings and materials			
Social interaction with peers			

Academic Areas	Weak	Adequate	Excellent
Handwriting			
Writing			
Reading			
Spelling			
Speaking and Listening			
Math			