



## International Applicant Recommendation Form: Principal/Head/Counselor

### To the Applicant:

Please type or print your name in the space below and then give this form to your Principal, Head, or Counselor

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Name of Student

*It is my desire that this letter be written in confidence and therefore I waive all rights of access to this letter.*

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Student Signature

Date

### To the Principal/Head/Counselor:

This form is a part of the Thetford Academy application. This recommendation will remain confidential and will not become a part of the student's permanent record. Your evaluation and comments, to be solely used by the Thetford Academy Admissions Committee, will be valuable in our assessment of this student's potential. Please complete this form and send it directly to the Thetford Academy Admissions Committee. Feel free to use additional sheets if necessary. Should you have any questions, please do not hesitate to contact us. Thank you for your cooperation and candid reflections.

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Principal/Head/Counselor Name

Email Address

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Signature

Date

---

School

Title

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School Address

City

State/Province

Postal Code

How well do you know the student academically? \_\_\_\_\_

As a person? \_\_\_\_\_

Number of students in school: \_\_\_\_\_ Grades served: \_\_\_\_\_ Number in applicant's grade: \_\_\_\_\_

Please explain your school's grading system. What is a passing mark? \_\_\_\_\_ Honors mark? \_\_\_\_\_

What percentage of your students receive which grades? \_\_\_\_\_

Does your school rank? \_\_\_\_\_ If yes, this candidate ranks \_\_\_\_\_ out of \_\_\_\_\_ students.

Are students placed in sections according to ability?  Yes  No

*If yes, please tell us which level the applicant is placed for each subject*

Is the student in good academic standing? *If no, please explain on a separate piece of paper.*  Yes  No

Has the student ever been dismissed, suspended, placed on probation, or received other disciplinary action?  Yes  No

Has he/she withdrawn from school voluntarily for an extended period of time for reasons other than health?  Yes  No

*If the answer to either of the questions above is yes, please provide a full explanation on a separate piece of paper.*

Student Name: \_\_\_\_\_

**APPROACH TO LEARNING, PERSONAL DEVELOPMENT AND SOCIAL RESPONSIBILITY**

	Excellent	Good	Fair	Poor
Academic Ability	_____	_____	_____	_____
Academic Achievement	_____	_____	_____	_____
Intellectual Curiosity	_____	_____	_____	_____
Effort/Determination	_____	_____	_____	_____
Ability to Work Independently	_____	_____	_____	_____
Organization	_____	_____	_____	_____
Creativity	_____	_____	_____	_____
Willingness to take Intellectual Risks	_____	_____	_____	_____
Concern for Others	_____	_____	_____	_____
Honesty/Integrity	_____	_____	_____	_____
Self-esteem	_____	_____	_____	_____
Maturity (relative to age)	_____	_____	_____	_____
Responsibility	_____	_____	_____	_____
Respect Accorded by Faculty	_____	_____	_____	_____
Respect Accorded by Peers	_____	_____	_____	_____
Emotional Stability	_____	_____	_____	_____
Overall Evaluation as a Person	_____	_____	_____	_____
Overall Evaluation as a Student	_____	_____	_____	_____

If the applicant is relatively weak or strong in any areas listed above, please elaborate:

Please comment on the applicant's character, citizenship and contributions to your community:

Please add additional comments on a separate sheet if necessary and send this completed form to:

Susan Essex Luce, International Student Program Coordinator  
Thetford Academy,  
304 Academy Road  
Thetford Center, Vermont 05075 USA  
Email: [international@thet.net](mailto:international@thet.net) Fax: 802-785-4805