

# Principal / Counselor Recommendation Form

**Parent Permission**

Applicant's Name \_\_\_\_\_

Public School District of Residence \_\_\_\_\_

Incoming Grade \_\_\_\_\_

**TO THE PARENT/LEGAL GUARDIAN:** My signature grants permission for my child's current school to share this information with the International Academy of Macomb.

Parent / Legal Guardian (please print) \_\_\_\_\_

Signature \_\_\_\_\_

**Principal/Counselor Recommendation**

**PRINCIPAL / COUNSELOR NAME:** \_\_\_\_\_

District: \_\_\_\_\_ School: \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

Does current performance indicate the capacity for success at IAM? \_\_\_\_\_

Do you have any concerns regarding the applicant? Please explain: \_\_\_\_\_

In comparison with other students in the candidate's grade / age group, please check the most appropriate box for the categories listed:

	Below average ←————→ Outstanding				
	No basis for judgment	1	2	3	4
Intellectual Ability					
Academic Potential					
Curiosity					
Motivation for Learning					
Work Habits					
Perseverance / Self Discipline					
Enthusiasm for Learning					
Co-Curricular Participation					

Principal / Counselor Signature \_\_\_\_\_

Date \_\_\_\_\_

Additional Comments: \_\_\_\_\_

**Principal/Counselor: Return completed form to IA Macomb by February 5, 2010.**