



RECOMMENDATION FOR ADMISSION

This form is confidential and should be completed by the student's current or previous homeroom teacher. Please email directly to: admissions@cisp.edu.kh once completed.

Information: Student

Last Name: _____ First Name: _____
Preferred Name: _____ Current Grade: _____
Current School: _____ Language of Instruction: _____

Information: Homeroom Teacher

Please fill out the following personal information and the questionnaire regarding the student.

Last Name: _____ First Name: _____
Position: _____
School's Phone Number: _____ Email: _____

1. How long has the student attended their current school? _____

2. Is the student meeting outcomes at grade level? Yes No

If 'No', please provide further information: _____

3. What are the student's strengths? _____

4. Are there any social or emotional areas that this student might find difficult or challenging? Yes No

If 'Yes', please provide more details: _____

5. Have the parents been supportive with the child's learning and cooperative with teachers and staff? Yes No

6. Please provide more details: _____

7. Please provide any additional comments or concerns you may have about this student (all comments are kept confidential):

Signature: _____

Date: _____