



**British International School
of New York**
River View Campus

TEACHER RECOMMENDATION FORM

To the parent/s of the applicant

Please fill in, sign this form and send it to your child's present school. A completed report is a necessary part of your application to the British International School of New York.

I hereby authorise you to send school records of my child:

Name of applicant: _____

to:

**The Admissions Office
The British International School of New York
River View Campus,
20 Waterside Plaza,
New York,
New York 10010.**

I understand that the Teacher Recommendation Form is confidential between the sending school and the British International School of New York and will be used only for the purpose of admission.

Signature of Parent _____

Date _____

To the teacher of the applicant/s

Thank you for taking a few moments to fill in this form. Your comments will help us understand if this applicant and the British International School of New York are a good match. This form will become part of the student's admission file and will remain confidential. Please return the form as soon as possible.

The British International School is unique in New York in offering the rigour of the UK National Curriculum and the enthusiasm and enquiry based learning approach of the IB Primary Years Programme. We offer admission to children we feel will flourish educationally and emotionally in the safe, nurturing environment we provide.

If you have any questions, please call the Admissions Office at 1 212 481 2700. You can also find out more about us by visiting our website www.britishinternationalschool.org.

Thank you for your help.



**British International School
of New York**
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**TEACHER RECOMMENDATION FORM FOR APPLICATIONS
TO RECEPTION OR YEAR ONE CLASSES**

APPLICANT INFORMATION

Name of student: _____ Gender: _____

Date of birth: _____ Preferred name: _____

Street address: _____ Home phone No.: _____

City/State/Zip/Country: _____

Present school name: _____ Proposed entrance date: _____

Teacher and class: _____ Date of this report: _____

How long have you known this child? _____ Submitted by: _____

Language spoken at home: _____ Any other languages? _____

Dominance: right left not yet established

DEVELOPMENT

Physical Development	Area of strength	Age appropriate	Progressing toward age appropriate	Area of concern	N/A
Draws with details					
Uses appropriate grip					
Works with manipulatives					
Sense of body in space					
Gait, fluidity, smoothness of movement					

Please describe any notable physical strengths or weaknesses: visual, motor, auditory (including frequency of ear infection), and comment on general health, including level of absenteeism.

Intellectual skills and development	Area of strength	Age appropriate	Progressing toward age appropriate	Area of concern	N/A
Follows directions given to a group					
Follows directions given individually					
Follows multiple step directions					
Comprehends stories read aloud					
Participates in classroom discussion					
Memory retention					
Clarity of speech					
Fluency of expression					
Vocabulary					
Ability to stay on discussion topic					
Appropriate syntax					
Relates sequentially					
Sound-symbol correspondence					
Recognises letters – <i>upper case</i>					
Recognises letters – <i>lower case</i>					
Recognises numerals					
Understands one-to-one correspondence					
Can write numerals					
Understands comparative terms (size, time)					
Recognises shapes					

Please comment on the child's language and speech development. Has the child been recommended for speech or language evaluation or therapy? (Please specify)

Please describe the child's ease of learning and ability to make meaningful connections.

Social/Emotional Development	Area of strength	Age appropriate	Progressing toward age appropriate	Area of concern	N/A
Self-esteem					
Acceptance of limits					
Self-motivation					
Interaction with peers					
Interaction with adults					
Resolves conflicts appropriately					
Separation from parents/ caregivers					
Respect for property of self					
Respect for property of others					
Accepts responsibility for actions					
Sense of humour					
Curiosity					
Attention span					
Cooperation					
Leadership skills					
Ability to follow peers					
Makes transition easily					
Accepts change					
Comfort with - large group					
Comfort with - small group					
Comfort – alone					

Usually chooses: Large group Small group Alone

Usually takes role of: Leader Follower Varies

Please comment on the child's social/emotional development.

Please describe the child's work habits: pace, perseverance, independence, problem-solving, ability to work to completion, and attitudes.

FAMILY

Is there anything significant about the home life which will help us to understand this child? (new baby, move, divorce/separation)?

Have all financial obligations been met?

Have you received active cooperation from the parents?

Please describe the parents' involvement with the school.

Additional comments:

Signed: _____ **Date:** _____

Title: _____ **Telephone:** _____