



ADMISSIONS OFFICE

SHARED TEACHER RECOMMENDATION FORM

For 2nd through 12th Grade Applicants

STUDENT'S FULL NAME: _____ GRADE: _____

PARENT OR GUARDIAN

Parent or Guardian: Please write your child's name in the space above and read and sign the following before giving this to your child's teacher. Please instruct your child's teacher to email a scanned copy of this document to admissions@ans.edu.ni from their institutional account.

I understand and agree that the information contained on this Teacher Recommendation Form is confidential and will be used only in the selection of applicants and not become part of the applicant's permanent file. I also agree that this completed form will not be available to applicants, parents, or anyone outside of the ANS Admissions Committee, and I waive any right that I may have to see it.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

MM/DD/YY

SIGNEE NAME: _____

SCHOOL FACULTY

School Faculty: The student whose name appears above is applying for admission to the American Nicaraguan School (ANS). ANS is a private, non-profit, co-educational K3-12th Grade institution with over 800 students from 35 different nationalities. The feedback we receive from his/her current or previous school is very valuable for us; please complete this confidential form and send a scanned copy of this form to admissions@ans.edu.ni from an institutional email account.

This Teacher Recommendation Form will be treated confidentially and will not be shared with parents. You may wish to keep the original copy for your files. Thank you for your collaboration and hoesty.

Note: The child's application will not be processed until the completed form is submitted to the ANS Admissions Office.

SCHOOL PRINCIPAL/COUNSELOR

1. How long have you known the student? _____

2. How often do you have contact with the student? Daily Weekly Ocassionaly

3. Is the student's general academic achievement: Above grade level On grade level Below grade level

4. Describe any particular academic strengths and/or weaknesses: _____

5. Describe the student's relations with his/her peers: _____

6. Describe the student's relation with adults: _____



7. Has the student been identified as having a learning difference or been recommended for a diagnostic evaluation or assessment?

8. Does the student participate in a special program, receive program modifications or accommodations, or receive academic or remedial support at or outside of the school? Please explain: _____

9. Is the student's record a true indication of his/her ability? If not, please explain factors that have interfered with his/her academic or social abilities: _____

10. Please comment on the parent's role in their child's education and of their support of your school's policies and educational mission: _____

11. Would the student be permitted to re-enroll in your school? If no, please explain: _____

12. Please check how you would rate the applicant's character, personality and work habits:

	Below Expectation	Age Appropriate	Strong
Academic ability			
Academic motivation			
Intellectual curiosity			
Integrity			
Organizational ability			
Study habits			
Maturity			
Attentiveness/Focus			
Leadership			
Self-confidence			
Reaction to criticism			
Respects school rules			
Respects rights of others			
Uses self-discipline			
Participation in group activities			
Shows positive attitude			
Follows directions			
Works independently			
Use of time			
Effort/Motivation			



13. Is there anything regarding the student that would be helpful for our Admissions Committee to know? _____

14. (For secondary students) Please comment on this applicant's suitability for a rigorous college preparatory program: _____

This applicant is:

Strongly Recommended

Recommended with reservations

Not Recommended

FACULTY'S NAME: _____ SCHOOL: _____

FACULTY'S SIGNATURE: _____ SCHOOL LOCATION: _____

DATE: _____ EMAIL ADDRESS: _____
MM/DD/YY



ENGLISH RECOMMENDATION FORM

To be completed by English Teacher

Teacher: Please note that this form is not to be used to determine admission to our school, but rather to help us place students in the appropriate language class. As such, please be as thorough as possible. Thank you for your collaboration.

1. How long have you known the student? _____
2. How often do you have contact with the student? Daily Weekly Occasional
3. Is the student's general academic achievement: Above grade level On grade level Below grade level
4. Please provide a brief description of the level of instruction, including, what kind of text and/or auditory materials are used: _____

5. Describe any particular academic strengths and/or weaknesses: _____

6. Describe the student's relations with his/her peers: _____
7. Describe the student's relations with adults: _____
8. Please comment on the student's level of interest and motivation in the language. _____

9. If they are not part of one already, do you think the student is prepared for a full English language immersion program? _____
10. Has the student been identified as having a learning difference or been recommended for a diagnostic evaluation or assessment? _____
11. Does the student participate in a special program, receive program modifications or accommodations, or receive academic or remedial support at or outside of the school? Please explain. _____

12. Is the student's academic record a true indication of their ability? If not please explain factors that have interfered with his/her academic or social abilities. _____

13. Please comment on the parent's role in their child's education and their support of your school's policies and educational mission: _____

14. Would the student be permitted to re-enroll in your school? If no, please explain: _____

15. (For secondary students) Please comment on this applicant's suitability for a rigorous college preparatory program: _____

This applicant is:

- Strongly Recommended Recommended with reservations Not Recommended

TEACHER'S NAME: _____ SCHOOL: _____

TEACHER'S SIGNATURE: _____ SCHOOL LOCATION: _____

DATE: _____ EMAIL ADDRESS: _____

MM/DD/YY



MATH RECOMMENDATION FORM

To be completed by Math Teacher

Teacher: Please note that this form is not to be used to determine admission to our school, but rather to help us place students in the appropriate math class. As such, please be as thorough as possible. Thank you for your collaboration.

1. How long have you known the student? _____
2. How often do you have contact with the student? Daily Weekly Occasionaly
3. Is the student's general academic achievement: Above grade level On grade level Below grade level
4. Describe any particular academic strengths and/or weaknesses in regards to Mathematics: _____

5. Describe the student's relations with his/her peers: _____
6. Describe the student's relations with adults: _____
7. Please comment on the student's level of interest and motivation in learning Mathematics. _____

8. Has the student been identified as having a learning difference or been recommended for a diagnostic evaluation or assessment?

9. Does the student participate in a special program, receive program modifications or accommodations, or receive academic or remedial support at or outside of the school? Please explain. _____

10. Is the student's academic record a true indication of their ability? If not please explain factors that have interfered with his/her academic or social abilities. _____

11. Please comment on the parent's role in their child's education and their support of your school's policies and educational mission: _____

12. Would the student be permitted to re-enroll in your school? If no, please explain: _____

13. (For secondary students) Please comment on this applicant's suitability for a rigorous college preparatory program: _____

14. What is the title of the current course and what textbook is being used? _____
15. What mathematics course is recommended for next school year? _____
16. Please mark those items that you believe the applicant has studied in Mathematics class at your school:
Covered (C) - Mastered (M)

Pre-Algebra	C	M
Factors fractions and exponents		
Operations with fractions involving variables and integers		
Ratios, proportions and percentages		
Algebraic expressions and integers		
Solving one step equations and inequalities		
Decimals and equations		
Solving equations and inequalities		
Linear functions and graphing		

General Math	C	M
Number theory and fractions		
Adding and subtracting fractions		
Multiplying and dividing fractions		
Ratios, proportions and percentages		
Decimals		
Algebra - patterns and variables		
Data and graphs		
Tools of geometry and measurement		
Algebra - integers		



Pre-Algebra	C	M
Right triangles in algebra		
Non-linear functions and polynomials		
Spatial thinking		
Area and volume		

Algebra	C	M
Basic statistics		
Algorithm of whole numbers		
Fractions and decimals		
Ratio and proportion		
Percentage		
Solving and graphing linear equations		
Solving and graphing linear inequalities		
Systems of linear inequalities		
Systems of linear equations		
Lays of exponents		
Factoring polynomials		
Simplifying rational expressions		
Quadratic equations and its graphs		
Functions, domain, and range		
Power roots and radicals		
Complex numbers		
Polynomial functions		
Synthetic division		
Rational functions		
Exponential functions		
Logarithmic functions		
Trigonometric ratios and functions		
Trigonometric graphs and identities		
Sequence and series		
Permutations, combinations, and probability		

General Math	C	M
Exploring probabilities		
Algebra - equations and inequalities		
Place value of whole numbers and decimals		
Multiplication, division and algebra		
Measurement/data and graphing		
Addition and subtraction of fractions and decimals		
Multiplication and division of fractions and decimals		
Geometry and measurement		
Ratio, proportion, percent and probability		
Algebra - Integers and coordinate graphing		

Geometry	C	M
Lines and angles		
Properties of triangles		
Congruent triangles		
Similar triangles		
Right triangles		
Basic triangles		
Polygons (quadrilaterals, parallelograms, etc.)		
Circles, tangents, arcs and chords		
Transformations		
Areas and volumes		

17. (For secondary students) Please comment on this applicant's suitability for a rigorous college preparatory program: _____

This applicant is:

Strongly Recommended
 Recommended with reservations
 Not Recommended

TEACHER'S NAME: _____ SCHOOL: _____
 TEACHER'S SIGNATURE: _____ SCHOOL LOCATION: _____
 DATE: _____ EMAIL ADDRESS: _____
 MM/DD/YY