Principal's Recommendation Form

☆Please confirm that ICUHS is the applicant's first choice.

ICUHS

 \square Yes, I have confirmed.

International Christian University High School		
1-1-1 Higashi-cho, Koganei-shi, Tokyo, Japan 184-8503		
		's records and
Applicant's Name (Last / First) (志願者氏名)	// Applicant's Date of Birth	(day/month/year) (生年月日)
Applicant's Present Address (志願者現住所)	(country)	(post-code)
Name of School Attended (現地校名)		
Parent's Name (保護者氏名・活字体で)	Parent's Signature (保護者署名)	Date
Principal's Recommendation		
School (ICUHS). This form is requested for E	(保護者記入欄) I hereby authorize the release of my child's records and admission to International Christian University High School. (Last / First) (志願者氏名)	
rent's Name (保護者氏名・活字体で) Parent's Signature (保護者署名) Date		

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

	Outstanding (top 5%)	Excellent (top 10%)	Good (above average)	Average or below
Enthusiasm for Learning				
Intellectual Ability				
Perseverance/Self-Discipline				
Self-confidence				
Leadership				
Responsibility				
Concern for Others				
Respect Accorded by Faculty				
Respect Accorded by Peers				

Please list any advanced courses (classes) taken by the student.	
Please list any courses for students with limited English ability (ESL) taken by the student.	

1 2	3	
If the student has been absent or tare	dy more than ten times in one academic year, p ear • [tardy]days during Gra	lease indicate belov
more complete picture of the student learning and participating in school ac what way did the student contribute t	Please provide any additional information the We are particularly interested in the student's ctivities and his or her relationship with other fel to your school as a foreign student? How would you about a foreign country and culture? If you re	enthusiasm for low students. In you evaluate the
School Declaration I certify that the above information hof this student.	nas been completed by me and in my opinion a t	rue assessment
Name of Recommender (Please Print)	Title	
Signature of Recommender	/(day/n	nonth/year)
Name of School	Email	
Mailing Address	(country) (post-code)	
	nt) Signature of School Principal 1	 Date

Thank you very much for your cooperation. This form, after completion, should be placed in an envelope with your signature or school stamp across the seal, and should be returned to your student directly or mailed to the applicant's present address (at the top of this form).