**Counselor/Principal Recommendation Letter**

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| --- |
| For student and parent: We hereby relinquish any rights of access to this confidential evaluation.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Student’s Printed Name Student’s ID Number  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Student’s Signature Parent’s Signature |

**To the Teacher:** The Texas Academy of International Studies relies on assessments by teachers and administrators in reviewing applications. We deeply appreciate the kind donation of your time and perspectives in completing this form.

1. **Please indicate whether your school offers the following honors or accelerated programs and whether this candidate has enrolled in these courses. Please check boxes on the right only if applicant has enrolled in these courses.**

**School Offers? Applicant Enrolled?**

\_\_\_Yes Honors Algebra I \_\_\_Yes

\_\_\_Yes Honors Algebra II \_\_\_Yes

\_\_\_Yes Honors Geometry \_\_\_Yes

\_\_\_Yes Honors English \_\_\_Yes

\_\_\_Yes Honors Biology \_\_\_Yes

\_\_\_Yes Honors Chemistry \_\_\_Yes

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

1. **Applicant’s Academic Rank:** No. \_\_\_\_\_ out of \_\_\_\_\_ students

Rank not yet available \_\_\_\_\_\_

1. Absences \_\_\_\_\_\_\_\_\_\_ Tardies \_\_\_\_\_\_\_\_\_\_

Applicant’s Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Was applicant ever suspended from school?** \_\_\_\_ Yes \_\_\_\_ No If yes, please explain.
2. **Please provide information about that student’s maturity, drive, dependability and character.**

Name of Evaluator\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Role or Position at School

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Address City, State, Zip School Phone

No. of Years Counseling/Administrator \_\_\_\_\_\_\_\_\_\_

Length of Time Knowing Candidate \_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Texas A&M International University**

**The Texas Academy of International Studies**

**5201 University Blvd., KL 435A**

**Laredo, Texas 78041**