

自信心 Emotional Stability/Maturity 情绪成熟

Makati Hope Christian School

Makati Campus: 2312 Don Chino Roces Avenue Extension Brgy Magallanes, Makati City
 Tel. No. 8817-1111 loc. 102 / 117 / 206 Email: registrar@makatihope.edu.ph
 Ortigas Campus: St. Francis Square (behind SM Megamall) Ortigas Center, Mandaluyong City
 Tel. No. 8632-1010 loc. 151

RECOMMENDATION FORM

推荐表

Name of Applicant:姓名		Age:年龄Gender:性别						
Learner Reference Number (LRN): School:学校				Current Level/Grade:				
			Contact No.电话号码					
School Add: 学	丝校地址							
To GuidanceC	ounselor /Cla	uss Adviser:辅导	<u>异员/导师</u>					
like to reque applicant. 上述学生正在	st for your 申请马加智嘉	cooperation i	in providing u 我们要求您为我	s with an ob 战们提供对申请	hristian School. jective evaluati 人的适当评估与 识申请人有多长的	on of the 合作。		
encircl		E的整校批中,	申请人属于: pp10%排前	(请圈)	nt belong to th 6Upper 25%25			
	%50%以上		er 50%50%以	_	ver 2525%以下			
We would like Please conside	e to know yo r his/her invo ss/batch.我们	ur evaluation dvement in bo 想知道您对学	th academic an	intellectual cand	apacity and pers ic activities comp 整个班级/校批材	pared with		
Please check th	ne most appro	opriate box 请	选最合适的特性	Ė				
Categories	Excellent 优秀	Superior 优越	Above Average 平均高	Average 平均	Below Average 平均低	No basis o Judgmen 没判断		
Academic owth Potential 存在学术发展								
f – Confidence								

Warmth of Personality 个性的温暖							
Motivation 动机							
Personal Initiative 个人主动							
Creativity 创造力							
Leadership 领导能力							
Concern for hers 美心别人							
nse of S ervice 服务意识							
	□ No 否 / ess 学校迟到	Acad	emic 学术	☐ Disc	plinary 纪律	Absences 每	快席
D. Please Com	ess 学校迟到 give details	如果有,请 ————————————————————————————————————	背写各项 ————— vhich, in yo	our opinic	n, would be he	Absences &	
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Please return this appraisal to the applicant in a sealed envelope with your signature across the flap. Thank you very much for your assistance.

请您将此评估报告给申请人,并在密封信中签名。谢谢您的协助。