



**STUDENT REFERENCE FORM FOR IMS ELEMENTARY PROGRAMME**

**To parents:** This form is to be completed by your child’s school principal/teacher. Once the form is completed they will return it to the Admissions Office of The International Montessori School, Hong Kong.

Name of Applicant \_\_\_\_\_ Date of birth \_\_\_\_\_

Present School \_\_\_\_\_ Date of Entry \_\_\_\_\_

Grade/Year Level \_\_\_\_\_ Joining date \_\_\_\_\_

**To the Principal/Teacher:** The above named student has applied to enter the Elementary Programme of the International Montessori School, Hong Kong. We appreciate you taking the time to complete this form as part of our admission process. Please be advised that all information will be kept confidential.

**Please complete the form and return it to:  
Admissions Office**

**The International Montessori School**  
Ma Hang Estate, Phase III, Stanley, Hong Kong (off Stanley Plaza)  
Tel: (852) 2772 2468 Fax: (852) 2566 7188 Email: apply@ims.edu.hk

Part 1 – Please tick the most appropriate description of this child:

<b>SOCIO-EMOTIONAL SKILLS AND WORK HABITS</b> 1 = Never 2=Developing skill with assistance 3=Age-Appropriate Progress 4=Consistently Demonstrates				
Is aware of the needs of others	1	2	3	4
Is able to express needs and feelings appropriately	1	2	3	4
Participates and works appropriately in a group	1	2	3	4
Displays self-confidence	1	2	3	4
Is able to listen and follow instructions	1	2	3	4
Copes with transitions and challenges	1	2	3	4
Makes work choices independently	1	2	3	4
Is able to work independently for an age-appropriate period of time	1	2	3	4
Is able to exhibit age appropriate study habits and organizational ability	1	2	3	4
Stays on task for a sustained period/works with persistence	1	2	3	4
Completes work with care and pride – gives best effort	1	2	3	4

Please evaluate the applicant's academic performance:

**Overall:** \_\_\_ below Grade / Age Level \_\_\_ At Grade / Age level \_\_\_ Above Grade / Age level

**Reading:** \_\_\_ below Grade / Age Level \_\_\_ At Grade / Age level \_\_\_ Above Grade / Age level

**Writing:** \_\_\_ below Grade / Age Level \_\_\_ At Grade / Age level \_\_\_ Above Grade / Age level

**Mathematics:** \_\_\_ below Grade / Age Level \_\_\_ At Grade / Age level \_\_\_ Above Grade / Age level

If any aspect is above or below grade level expectations, please provide actual or estimated Grade / Age level (i.e. PM Benchmark reading level, etc.):

Part 2 – We would be grateful if you could share as much information on the following:

Please write a short descriptive assessment of this student. Please include academic strengths and weaknesses, personal achievements and hobbies.

Please comment on the likelihood of this student being successful in a challenging program.

To the best of your knowledge, has this student been recommended for or is receiving any special education services and/or tutoring support? Please explain.

What behavioral difficulties, if any, has this student demonstrated?

Is the student's attendance and punctuality satisfactory?

IMS is a very community-based school and parent involvement is important to us. Has this family been a supportive partner in reaching this student's goals this year?

Is there any additional, useful information that you feel we should know about this student?

I verify that to the best of my knowledge, the above information is true and accurate.

Name: \_\_\_\_\_ Position: \_\_\_\_\_

If you are willing to give us further information if required, please tick here. [ ]

Tel: \_\_\_\_\_ Best time to call: \_\_\_\_\_

Email address: \_\_\_\_\_

**Thank you for your help.**