



K. International School Tokyo Confidential Recommendation

for Future Horizons Scholarship Program Applicants

To be completed by someone who has known the candidate for approximately 5 years

Student's Name _____
 (Passport name) (Family) (First) (Middle)

Date of Birth ____/____/____ Male____ Female____ Current Grade ____
 month day year

Name person completing this form _____

School Name _____

School Address _____

How long have you known the applicant? _____

Evaluate your perceptions of the candidate's academic performance relative to other children of this age. Please check (✓) the table below.

No opportunity to observe	Academic Qualities	Poor	Average	Good	Excellent
	Ability to work independently				
	Academic achievement				
	Academic potential				
	School participation				
	Communication skills				
	Mathematics ability				
	Organizational skills				
	Reading ability				
	Study habits				
	Writing ability				

Evaluate your perceptions of the candidate's personal qualities and social skills relative to other children of this age. Please check (✓) the table below.

No opportunity to observe	Qualities	Poor	Average	Good	Excellent
	Adaptive/flexible				
	Attention/focused				
	Co-curricular involvement				
	Honesty				
	Leadership				
	Personal behavior				
	Relationship with adults				
	Relationship with peers				
	Self-confidence				

1. Describe your relation to the candidate.

2. What are the candidate's strengths or special abilities?

3. In what areas would you like to see the candidate grow?

4. What 3 adjectives would you use to best describe the candidate?

The objective of the Future Horizons Scholarship Program is to provide support to students with proven excellence in academics who, without financial support, would not be able to access quality education.

5. Why do you think the candidate is ideal for the Future Horizons Scholarship Program at K. International School Tokyo?

5. How do you feel the candidate could contribute to our school community?

6. In line with our Scholarship Program objective, how would you describe the applicant family's financial context and level of financial need?

Reference's Signature

Date

KIST appreciates your expertise in completing this recommendation. Please give the completed recommendation to the applicant/parents in a sealed envelope, signed across the seal, or fax it directly to KIST at (+81) 3.3642.9994. Thank you very much for your cooperation.