



# Student Reference Form

The student named below has applied for admission to *Brookes Shawnigan Lake independent school*.

Your honest feedback will be particularly helpful in our evaluation of this applicant. All remarks will be kept confidential.

\_\_\_\_\_  
*Applicant's Surname*

\_\_\_\_\_  
*First name*

Current grade level \_\_\_\_\_ How long have you known the candidate (years/months)? \_\_\_\_\_

In what capacity? \_\_\_\_\_

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## Applicant's Character

How does the applicant relate to his/her peers? (please be as specific as possible, giving examples where appropriate.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe the attributes and abilities of the applicant which appear to you to be noteworthy:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In your opinion, what qualities/characteristics does the applicant have that you feel would make him/her successful in a self-disciplined boarding environment?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In your opinion, what are the applicant's two greatest strengths?

\_\_\_\_\_  
\_\_\_\_\_

In your opinion, what are the applicant's two greatest challenges?

\_\_\_\_\_

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In your opinion, how would you rate the applicant to students of the same age whom you have known? Please check one box in each category to summarize your rating of the applicant:

As a student:     Outstanding     Excellent     Above-Average     Average     Below-Average

As a person:     Outstanding     Excellent     Above-Average     Average     Below-Average

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

\_\_\_\_\_

## Student Reference Form – page 2

Based on your knowledge of the applicant, please rate him/her in the categories listed below:

Category	Outstanding	Very Good	Good	Average	Poor	No Rating
Integrity						
Respect and concern for others						
Leadership potential						
Emotional stability / maturity						
Relationship with peers						
Respect accorded by faculty						
Study habits						
Perseverance and Initiative						
Enthusiasm						
Sense of Humour						
Reading and writing ability						
Organizational skills						
Intellectual curiosity						
Ability to work independently						
Ability to work with others						

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### Additional Comments

Please add any additional comments that would help us to get to know the applicant better.

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### Your Contact Information

Name of School (if applicable) Date

Address (Street and No., City/Town, Province, Country, Postal Code)

Referrer's Name Position

Business telephone number Email

Thank you for taking the time to complete this reference form. The purpose of this form is to allow us to get a better sense of the applicant's strengths and any areas which may require support. We appreciate your assistance.

If you would like us to contact you to discuss anything, please indicate below:

\_\_\_\_\_ Yes, I would like you to call me to discuss this form further.