

Recommendation Form

The parents of			have applied to have their child admitted to Hong Kong Adventist		
Academy. We ask your help in ev	aluating the	applica	nt as a potential student. Please provide us	with the best possible	
information so that we can make	the best dec	ision for	enrollment. Thank you.		
Please circle the number and iden	tifies the ite	ms liste	d to the right by using the following guide	line·	
1 - Poor			Honesty	10 20 30 40 50 No	
2 - Below Average			Attitude Toward Authority	10 20 30 40 50 No	
3 - Average			Influence on Peers	10 20 30 40 50 No	
4 - Above Average			Ability get along with others	10 20 30 40 50 No	
<u>c</u>				10 20 30 40 50 No	
5 - Superior			Punctuality		
N - Inadequate Information			Emotional Stability	10 20 30 40 50 No	
			Motivation to Learn	10 20 30 40 50 No	
			Intellectual Ability	10 20 30 40 50 No	
			Health	10 20 30 40 50 No	
			Home Environment	10 20 30 40 50 No	
			Religious Commitment	1º 2º 3º 4º 5º Nº	
Within your knowledge has the ap	plicant eve	r:			
Used Tobacco	-	N□	Been involved with a theft	$Y \circ N \circ$	
Used Alcoholic Beverages	Yo	N□	Been suspended from school	$\mathbf{Y} \circ \mathbf{N} \circ$	
Used Illegal Drugs	Yo		Been detained by police	Yo No	
Used Profane Language	Yo		Title detailed by Perric		
Please share any other comments	you may ha	ive abou	t the applicant and/or his or her family:		
What is your recommendation to Accept without reservation Accept with reservation Do not accept I would prefer to talk to	tion 1				
Name:			Date:		
Signature:			Telephone & Email: _		
Relationship with the applicant: _			Position in the Organi	zation:	
Please fold, staple, and put in the	mail or ema	ail to <u>adı</u>	missions@hkaa.edu.hk. Thank you.		

Please Fold Here	
From:	

Hong Kong Adventist Academy 1111 Clear Water Bay Road Sai Kung, NT Hong Kong, SAR

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