



**SHSID Applicant Recommendation Form  
For Admission to Grade 6-12**

Name of Applicant (as on passport): \_\_\_\_\_  
 Applicant's Present School (full name): \_\_\_\_\_ Present Grade: \_\_\_\_\_

How are you related to the student? (Please check the relevant boxes below)

- Homeroom Teacher      Grade Director      Dean of Teaching Affairs  
Dean of Student Affairs    Principal      Other \_\_\_\_\_

The above mentioned student is applying for admission to Shanghai High School International Division (SHSID). We appreciate the time you spend completing this recommendation form, and request that the person most knowledgeable about the student respond to the questions below. The checklist helps us evaluate areas of general interest and student capabilities. Your honest evaluation of the applicant will be of great value to the Admission Committee.

**All information shared is considered confidential and disclosed only to the Admission Committee and other school personnel as deemed necessary by the Office of Admission.**

Please tick the relevant options in the below table:

	Outstanding	Above Average	Average	Below Average	Not Applicable
Academic Achievement					
Intellectual Promise					
Communicates Oral Ideas Clearly					
Communicates Written Ideas Clearly					
Creative Thought					
Motivation					
Faculty Respect					
Disciplined Habits					
Reaction to Criticism					
Self Confidence					
Concern for Others					
Reaction to Setbacks					
Personal Conduct					
Personal Integrity					

Please answer the following questions:

1. How long have you been familiar with this applicant? How do you know him/her (through what class, or what activity)?

\_\_\_\_\_



Name of Applicant (as on passport): \_\_\_\_\_

2. Does he/she meet the requirement of your school to continue studying?  
\_\_\_\_\_
3. Have there been any disciplinary actions involving bullying, fighting, breaking school rules, alcohol or smoking? Yes No  
If yes, please explain in detail: \_\_\_\_\_
4. Have any psychological problems involving anxiety, hyperactivity, autism or any other learning disorders been displayed by the applicant? Yes No  
If yes, please explain in detail: \_\_\_\_\_
5. Have any academic integrity problems involving cheating, plagiarism, forging a signature? Yes No  
If yes, please explain in detail: \_\_\_\_\_
6. Does he/she get along well with other students?  
\_\_\_\_\_
7. Does he/she get along well with teachers?  
\_\_\_\_\_
8. Are the student's parents willing to cooperate with the school faculty? Yes No  
If no, please explain in detail: \_\_\_\_\_
9. Is he/she absent frequently?  
\_\_\_\_\_
10. Is there any special program, like special talent or learning difficulty?  
\_\_\_\_\_
11. Aside from the above mentioned, is there anything else you would like to highlight about the student?  
\_\_\_\_\_
12. Are you willing to receive a phone call to discuss details about the student? Yes No

Name of Referee: \_\_\_\_\_ School Name (full name): \_\_\_\_\_  
Position of Referee: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

Signature of Referee: \_\_\_\_\_  
Date (mm/dd/yy): \_\_\_\_\_

Note: Please print and handwrite this form. And send it to the SHSID Admissions Office by Email (Puxi Campus: [admission@shsid.org](mailto:admission@shsid.org) Pudong Campus: [admission\\_pd@shsid.org](mailto:admission_pd@shsid.org)).

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