

**Confidential Student Reference Form**

Name of Student: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

**Parental Authorization:** As part of the application process to Cayman International School, I hereby authorize the release of information regarding my child (named above) to be made to Cayman International School.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Parent)/Guardian: \_\_\_\_\_

Present School: \_\_\_\_\_ Date of Entry to School: \_\_\_\_\_

**Dear School Principal or Guidance Counselor:**

The student named above has applied to Cayman International School. The information below is required as part of the application process. Please complete pages one and two, where applicable, and return to Cayman International School via fax (345-945-4650) or email: [admissions@cayintschool.ky](mailto:admissions@cayintschool.ky). The information will be kept in the strictest confidence.

1. How long have you known this student and in what capacity? \_\_\_\_\_

2. Are there any significant discipline or behavioral issues that you are aware of with this student?

Yes  No

If yes, please explain: \_\_\_\_\_

3. Have all fees due to your school been paid on time?  Yes  No

4. Is there any outstanding debt?  Yes  No

5. Using the scale below, how supportive and cooperative are the student’s parents?

<i>Not supportive/cooperative</i>							<i>Extremely supportive/cooperative</i>			
1	2	3	4	5	6	7	8	9	10	

6. Using the scale below, how well does the student get along well with his/her peers?

<i>Poor/unhealthy peer relationships</i>							<i>Excellent/healthy peer relationships</i>			
1	2	3	4	5	6	7	8	9	10	

7. Using the scale below, how well does the student respond to authority?

<i>Does not respect authority</i>							<i>Very responsive to authority</i>			
1	2	3	4	5	6	7	8	9	10	



8. Please indicate the student's level of social/emotional development below:

- |                       |                                  |  |                                  |  |                                   |
|-----------------------|----------------------------------|--|----------------------------------|--|-----------------------------------|
| Attention Span        | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Follows Directions    | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Completes Tasks       | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Self Confidence       | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Accepts Consequences  | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Displays Good Manners | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |

9. If in Grades K-12, please indicate the student's level of academic performance below:

- |                                   |                                  |  |                                  |  |                                   |
|-----------------------------------|----------------------------------|--|----------------------------------|--|-----------------------------------|
| Current Overall Academic Standing | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Reading Comprehension             | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Verbal Ability                    | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Writing Skills                    | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Mathematics                       | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Classroom Participation           | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Study Habits                      | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Motivation to Learn               | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Organization                      | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |
| Attendance                        | <input type="checkbox"/> Unknown | <input type="checkbox"/> Below Average | <input type="checkbox"/> Average | <input type="checkbox"/> Above Average | <input type="checkbox"/> Superior |

10. Describe any other significant concerns or strengths related to this student: \_\_\_\_\_  
 \_\_\_\_\_

11. The following information should be provided to the parents or sent directly to CIS.

**Please check any that apply for this student while attending your school.**

- Copies of report cards and progress reports for previous two years
- Standardized testing results
- Psychological reports
- Special Education reports (Social Worker Reports, Individualized Education Plans-IEPs or ILPs)
- Official Transcript (Grades 9-12)

Name of School Official (**Counselor or Principal**) Completing this form:

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

Email of School Official: \_\_\_\_\_ Phone: \_\_\_\_\_

Thank you for your assistance. Please send the completed form by email ([admissions@cayintschool.ky](mailto:admissions@cayintschool.ky)), fax (345-945-4650) or courier to the following address:

**Admissions Office**  
**Cayman International School**  
 95 Minerva Drive, Camana Bay  
 P.O. Box 31364  
 Grand Cayman KY1-1206  
 Cayman Islands

