## ITALIAN EXCHANGE XX TEACHER RECOMMENDATION

Applicant's name Street	Telephone			
		City	State	Zip
INSTRUCTIONS TO Please ask five teachers from recommendation are part of the performance	om this school year ( f your application. You with your entire appli	ou need to return the UNO cation folder. <i>Opening the</i>	PENED envelope to eletters of recommen	Mrs. Hott room 401 on o
Deadline: January 27, 201	17			
	ons on this form will tition for this home is possible. Place the ne across the flap to cart of the application.	be evaluated along with the stay exchange trip. There form in an envelope and we ensure confidentiality. Retuined to the with respect to authorize the stay of the	fore, we ask you to write the student's na urn the sealed envelop	answer each question a me on the front. Sign th pe to the student who wil
	Excellent 3	Above average 2	Average 1	Below average 0
Respect to authority				
Peer relationship				
Class participation				
Group activities				
Individual schoolwork				
Intellectual Performance				
Please explain:				
•				
2. Research indicate	es that the factors	listed below are importa	ant for successful in	tercultural adjustment
	Excellent 3	Above average 2	Average 1	Below average 0
Curiosity			-	
Ability to tolerate failure				
Ability to tolerate failure Ability to communicate				
·				
Ability to communicate Open-mindedness				
Ability to communicate				
Ability to communicate Open-mindedness Adaptability/flexibility Self-motivation				
Ability to communicate Open-mindedness Adaptability/flexibility				

4. Check the following:	I strongly recommend this applicant I recommend this applicant I have some reservations ( <b>Please describe below</b> ) I do not recommend this applicant	
Please be specific:		
Your name (Please Print)	Title	
Signature	Date	

3. How long, and in what context, have you known this student?