

Please submit complete application form to: International Student Coordinator, Lakehead Public Schools International (LPSI) 2135 Sills Street, Thunder Bay, Ontario, Canada, P7E5T2 Phone: 1-807-625-5176 | Fax: 1-807-623-7848 international@lakeheadschools.ca | http://international.lakeheadschools.ca

## LETTER OF RECOMMENDATION

Name and Address of School:  Please rank the student in comparison to their classmates by marking an "X" in the appropriate box.  Category Top 10% Top 25% Top 50% Bottom 50' Academic Ability Academic Performance Positive Attitude Toward School Neatness Stability Maturity Adaptability Leadership Capabilities Cooperation Friendliness Potential as an International Student How long and in what capacity have you known this student?  Evaluation of their potential success as an international student:  Very Good Good Average What is this student's attitude towards school and schoolwork?  Very Good Good Average	Student Name:		Student Date of Birth:  dd/mm/yyyy  Position:		
Please rank the student in comparison to their classmates by marking an "X" in the appropriate box.  Category Top 10% Top 25% Top 50% Bottom 50  Academic Ability  Academic Performance  Positive Attitude Toward School  Reatness Stability  Adaptability  Adaptability  Adaptability  Adaptability  Adaptability  Academs Capabilities  Cooperation  Friendliness Potential as an International Student  How long and in what capacity have you known this student?  Evaluation of their potential success as an international student: Very Good Good Average  What is this student's relationship with their fellow classmates? Leader Cooperative Uncoor  Does this student have a history of frequent absence from school? Yes No					
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Please add any appropriate and informative comments for this recommendation:	Does this student have a history of frequency	uent absence from s	school? Yes	ONo	
	Please add any appropriate and informa	ative comments for t	his recommendation	:	_