



# ALCS Reference Questionnaire

Student Name: \_\_\_\_\_

Reference Name: \_\_\_\_\_

Academic Year: \_\_\_\_\_ Date: \_\_\_\_\_

## Confidential

We would like to get to know the student applying to ALCS better. Your reference and any insights you can provide are invaluable!

**Please Note:** ALCS is a full inclusion school and we do not provide any English as a second language training or remedial learning options. Students need to be able to function and learn in an English-only classroom.

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**Reference:** Please complete the following questions regarding the above named student. We ask you return via email to the admissions dept at [admissions@alcs.us](mailto:admissions@alcs.us) or fax to 1-608-221-8572. **DO NOT return to student.** This is a confidential document.

1. Describe the student's overall academic performance in your experience. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What is the student's overall character like? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. In the following areas of English, how does the student perform?

**Reading:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Writing:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Speaking:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Comprehension:** \_\_\_\_\_

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**Vocabulary:** \_\_\_\_\_

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4. Is this student motivated to learn? Does s/he like learning? \_\_\_\_\_

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5. Is the student, in your opinion, able to handle change or transitions well? \_\_\_\_\_

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6. How does this student manage socially at school or in class? \_\_\_\_\_

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Finally, do you have any concerns about this student studying abroad or their ability to handle her/himself academically in an English-only classroom? If so, please specify. \_\_\_\_\_

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