

## CONFIDENTIAL PRINCIPAL'S REFERENCE

**Student's Name:** \_\_\_\_\_

**Application to enter Year Level** \_\_\_\_\_ **in Year 20** \_\_\_\_\_

The above mentioned applicant is seeking admission to Annandale Christian College and is required to supply a reference from his / her current Principal. Upon completion, kindly return the form directly to the **Principal, Annandale Christian College, PO Box 1366, Aitkenvale, Qld. 4814** or by email to **enrol@acc.qld.edu.au**.

**I have known the above student for a period of** \_\_\_\_\_ **years. He/she is currently in Year** \_\_\_\_\_.

**Please tick (✓) where applicable:**

- |   |   |
|---|---|
| <p><b>1.</b> In my opinion the student has shown the following ability in his/her studies:</p> <p><input type="checkbox"/> Well Above Average      <input type="checkbox"/> Above Average<br/> <input type="checkbox"/> Average<br/> <input type="checkbox"/> Below Average</p> <p><b>2.</b> His/her application to school work has been:</p> <p><input type="checkbox"/> Excellent                      <input type="checkbox"/> Fair<br/> <input type="checkbox"/> Very Satisfactory          <input type="checkbox"/> Unsatisfactory<br/> <input type="checkbox"/> Satisfactory</p> <p><b>3.</b> In my view, the student's conduct at this school has been:</p> <p><input type="checkbox"/> Exemplary                      <input type="checkbox"/> Satisfactory<br/> <input type="checkbox"/> Consistently Good        <input type="checkbox"/> Unsatisfactory<br/> <input type="checkbox"/> Creditable</p> <p><b>4.</b> I consider the student to be of:</p> <p><input type="checkbox"/> Exceptional character      <input type="checkbox"/> Very reliable character<br/> <input type="checkbox"/> Acceptable character      <input type="checkbox"/> Disappointing character<br/> <input type="checkbox"/> Unacceptable character</p> <p><b>5.</b> The student's attitude to teachers &amp; fellow students has been:</p> <p><input type="checkbox"/> Excellent                      <input type="checkbox"/> Very Good<br/> <input type="checkbox"/> Satisfactory                  <input type="checkbox"/> Unsatisfactory</p> <p><b>6.</b> The student has special needs in the area of:</p> <p><input type="checkbox"/> physical impairment / mobility    <input type="checkbox"/> learning support<br/> <input type="checkbox"/> behaviour<br/>         Details: _____<br/>         _____</p> | <p><b>7.</b> In which areas of school life has this student experienced on-going difficulty at your school?</p> <p><input type="checkbox"/> Relationships with teachers      <input type="checkbox"/> Relationships with peers<br/> <input type="checkbox"/> Rules and regulations              <input type="checkbox"/> Achieving in studies<br/> <input type="checkbox"/> None of the above<br/> <input type="checkbox"/> Other: (please specify) _____<br/>         _____<br/>         _____</p> <p><b>8.</b> This student has been the subject of disciplinary action (eg: in-school suspension, out-of-school suspension)</p> <p><input type="checkbox"/> Yes                      <input type="checkbox"/> No<br/>         Details: _____<br/>         _____</p> <p><b>9.</b> The student has represented this school at:</p> <p>_____</p> <p>_____</p> <p><b>10.</b> In general:</p> <p><input type="checkbox"/> It gives me great pleasure to recommend this student<br/> <input type="checkbox"/> I am pleased to recommend this student<br/> <input type="checkbox"/> I recommend this student but believe there is scope for improvement in character / study with application and encouragement<br/> <input type="checkbox"/> Other: _____<br/>         _____</p> |
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**Other Comments:** \_\_\_\_\_

\_\_\_\_\_

**Principal's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**School:** \_\_\_\_\_

**Thank you for your time.**

Please certify with school stamp.