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Applicant's Name	e: Last Name	Given Name	Middle No	ame	Nickname			
	Eddiffallio							
applying for:	 Grade Level	Date School Year	e of Evaluation:					
Your candid and the in a sealed envelop	oughtful evaluation will h	ool Head: The student whose na nelp us assess his/her application ross the flap. You may also scan	n. Please complete this	form and return	to the applic			
valuator:								
Name of the Scho	ool:							
Address of the Sc	hool:							
Contact Number								
low long have v	long have you known the applicant: Designation/Position:							
			-					
CHARACTER AN	D PERSONALITY TRAIT	'S. Check the appropriate	column for your an	swar				
. CHARACIER AIT	DIEKSONALIII IKAII	Area of	Age-	Working	Area o			
	TRAITS	Strength	Appropriate	Towards	Concer			
Cleanliness and	Organization	[4]	[3]	[2]	<u> </u>			
Cooperation an	d Teamwork							
	espect							
Courtesy and Re	ative Thinking							
Courtesy and Re Critical and Cre								
· · · · · · · · · · · · · · · · · · ·	elf-control							
Critical and Cre Discipline and Se								
Critical and Cred Discipline and Se Honesty and Inte	egrity							
Critical and Cree Discipline and Se Honesty and Inte Initiative and Pro	egrity pactiveness							
Critical and Cre	egrity pactiveness ntial							

SKILLS	Area of Strength [4]	Age- Appropriate [3]	Working Towards [2]	Area of Concern [1]
Arithmetic and Logical Skills				
Oral Communications Skills				
Reading Comprehension Skills				
Time Management Skills				
Written Communication Skills				

A. In what area/s does the student☐ Music (Musical-Rhythmic)☐ Math (Logical-Mathematical)	□ Visual Arts (\	Visual Spatial)	_ Lanç	□ Language (Verbal-Linguistic)		
□ Self-smart (Intrapersonal)		nnerpersonar, ments (Bodily-K	nce (Naturalistic)			
		, ,	•	Chack appropriate box/os)		
B. What rank does the applicant be		_		check appropriate box/es/		
In his/her class: Top 10%	•	•				
In his/her grade level:	·	•				
Number of Students in Class:		Number of Stu	udents in the G	rade Level:		
III. OTHER CONCERNS						
A. Has the applicant received any If yes, please explain your a						
B. Has the applicant have any failir If yes, please specify the sub						
C. Does the student have any outst Yes No If yes, please specify	_					
IV. Parents Involvement: Please characterize the following. (Parent's support of the child's educe Parent's support to the teachers is Parent's support to school events Parental involvement in the school Parent's financial support to child's V. Recommendation I strongly recommend him I recommend him/her for I recommend him/her for I do not recommend him/ *Reason:	is overall is education is n/her for admissio admission with so admission.	☐ Strong ☐ Strong ☐ Strong ☐ Strong ☐ Strong ☐ on. Ome reservation	□ Average □ Average □ Average □ Average □ Average	□ Weak □ Weak □ Weak □ Weak □ Weak □ Weak		
Would you prefer to speak with us of School's Dry Seal	over the phone?	□ Yes	□ No			
				Name and Signature		
				Date		