



**Mutual Friends Student Exchange, Inc**  
**1745 Furnace Hill Road**  
**Denver, PA 17517 USA**  
**www.mfse.biz 717-431-8181**

**SCHOOL REFERENCE**

<b>Student Name:</b>	<b>Birth Date:</b>
----------------------	--------------------

**Directions:** This form is to be completed in English by the principle, guidance counselor or classroom teacher of the school the prospective student attended within the past year and then returned to Mutual Friends either by mail to our address above, email to vs@mfse.biz or fax to 717-431-8879. While this form is not necessarily required for entry into the Mutual Friends program, it can be helpful, and in certain circumstances is required, when making application to one of our cooperating schools.

Name of school	Name of person filling out this form	
Address of school	Title of person filling out this form	
	Telephone number (including country code)	
	Email address	
Dates student attended -	Last grade completed	Grade Point Average

**Student Evaluation**

**Directions:** Please evaluate the student on a scale of 1 to 5 (5 being exceptional and 1 being very poor) indicating your observations about the following areas.

Academic ability		Accepts responsibility	
English comprehension		Respects authority	
Reading skills and interest in reading		Focus and concentration	
Interest in education or subject matter		Follows directions	
Initiative and drive – performs to best of abilities		Completes assignments on time	
Emotional stability		Appropriate classroom behavior	
Personality		Regular attendance	
Recommendation as a student		Cooperation with teachers/other students	
Recommendation as a person		Leadership qualities	
Extra-curricular participation		Works well independently	
Cares about the quality of his/her schoolwork		Exhibits a teachable attitude	

**General Questions**

Is the student in good standing to re-enter your school at the next grade level?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Explain:	

Has the student been involved with drugs or alcohol?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Explain:	
Has the student participated in any interscholastic sports?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Explain:	
Has the applicant been involved in any disciplinary action?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Explain:	
Does the student have any physical, social or emotional disabilities?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Explain:	
Does the applicant receive any special supportive services or adaptations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Explain:	
Would you recommend this student to a new school or for a job?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Explain:	

**Other Information You Wish to Provide**

I grant permission for Mutual Friends Student Exchange, Inc to share this information with prospective schools for the purposes of evaluating this student for consideration for admittance.

---

Signature of School Official

Date