



# Académie Ste. Cécile International School

925 Cousineau Road, Windsor, Ontario N9G 1V8  
(519) 9691291 fax (519) 969-7953

## CONFIDENTIAL REFERENCE

for

\_\_\_\_\_

(Name of Student Applicant)

from

\_\_\_\_\_

(Name of School Principal or Teacher)

\_\_\_\_\_

(Name of School)

Address of School: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

1. I have known this student for \_\_\_\_\_ year(s).

2. In my opinion, the strengths of this students are:

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

3. In my opinion, the weaknesses of this student are:

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

4. I have observed that, in terms of behaviour and adherence to school rules, this student:

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5. In my opinion, in terms of social skills and interaction with peers, this student:

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6. I have observed that this student has the following interests:

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7. I am aware that this student has participated in the following activities:

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8. In my opinion, this student's experience at Académie Ste. Cécile International School should be \_\_\_\_\_ because \_\_\_\_\_

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

Signature

Académie Ste. Cécile International School thanks you very sincerely for your kind assistance.