



Studies Abroad for Global Education

Discover your world... Discover yourself.

PARENT RECOMMENDATION FORM

(To be completed by the applicant's parents or guardians)

Applicant Name: _____ Your relation to student: _____

1. Are you supportive of your child's involvement in this program? Please discuss any hopes or concerns you have for her/him in the program: _____

2. The SAGE program provides many opportunities for personal growth and development. The travel, meeting new friends and visiting new places also involve a certain amount of independence and self-reliance. How do you think your child will respond to such opportunities? _____

3. The academic expectations of the SAGE program are fairly rigorous. Please help us understand your child's attitude toward his/her schoolwork, particularly during his/her last year: _____

a. Does your child study well on his/her own? YES NO

b. Does your child enjoy studying? YES NO

c. Does your child have good study habits (organized, efficient)? YES NO

d. Other comments? _____

4. Does your child now receive, or in recent years has the student received any sort of personal or psychological counseling? Please describe: _____

5. Because of the unique cultural location of the SAGE schools, sensitivity to the traditions and expectations of another culture, and adherence to the rules and regulations of a boarding school are necessary. How do you anticipate your child will respond to these expectations? _____

6. At the SAGE schools, students and staff from many different countries live, work and play together in a close-knit community. What is your appraisal of your child with respect to:

honesty: _____

reliability: _____

self-discipline: _____

respect towards adults: _____

ease of making friends: _____

adaptability to new situations: _____

7. Smoking, use of alcoholic beverages and drug abuse are unacceptable at SAGE schools. Does your child have a history of using any of these? If yes, please explain:

8. Is there anything else that you feel that we should know about your child? _____

We realize that it may be difficult for a parent or guardian to appraise his or her son or daughter objectively. Yet we feel that your statement has value, as compared with statements by others not so close to an individual. We appreciate your willingness to share your comments.

Parent's/Guardian's Name _____ Date _____

Email: _____ I certify the above information is true and correct.

Please save and email this form to: apply@sageprogram.org, placing the applicant's name in the Subject line.