



Convent of Mercy Academy "Alpha"

Character Reference Form

For External Applicants Only

*This form **MUST** be completed by any of the following administrators at the applicant's previous school: Principal, Vice Principal or Dean of Discipline.*

1. STUDENT'S NAME:
(First Name)
(Middle Name)
(Last Name)
2. NAME OF SCHOOL LAST ATTENDED:
3. SCHOOL TELEPHONE #:
4. YEARS OF STUDY AS A STUDENT OF THIS SCHOOL:FROM TO

SECTION A

DISCIPLINARY RECORD

<i>Kindly tick in the appropriate space</i>	Yes	No
1. Has this student been involved in any fight (s)?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has this student been found in possession of a weapon or contraband item at school?	<input type="checkbox"/>	<input type="checkbox"/>
3. Has this student ever been suspended/expelled from school?	<input type="checkbox"/>	<input type="checkbox"/>
4. Has the parent/guardian of this student been asked to report to the school for any disciplinary matter regarding the student?	<input type="checkbox"/>	<input type="checkbox"/>
5. Has this student ever been referred for counselling?	<input type="checkbox"/>	<input type="checkbox"/>

If yes to Question 3 provide relevant information. _____

If yes to Question 5 please provide relevant information. _____

Additional information you wish to offer. _____

<i>Kindly tick in the appropriate space</i>	A	B	C	D	E
Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude to work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student's readiness for Tertiary Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A -Excellent B- Very Good C- Good D- Satisfactory E-Unsatisfactory

SECTION B
LEADERSHIP AND SCHOOL INVOLVEMENT

What leadership position(s) if any, did this student hold at school?

What are the clubs and societies that this student participated in?

What is/are the Sport Team(s) that this student participated in?

Give details of Community Service completed by the student along with the number of hours.

I _____ in my capacity as _____ of
(Administrative Post)

_____ hereby confirm that the information
(Name of School)

provided above is accurate.

Signature

School Stamp

Date