



Michigan-Shiga High School Exchange Teacher Recommendation Form

Your student (or former student) is applying to be one of 15 high school students from the State of Michigan to participate in a two-way international exchange with students from Shiga Prefecture, Japan. In addition to traveling to Shiga during the coming summer, your student will also host her/his exchange partner for two weeks in Michigan in the fall. Please answer the questions provided regarding your students ability to act as a good representative of your school, Michigan, and the U.S.

Instructions for the recommender: Please place the completed form in an envelope and write the student's name on the front. Seal the envelope and sign your name across the flap to ensure confidentiality. Return the sealed envelope to the student to be forwarded (unopened) as part of his/her application. **Note:** *For this recommendation to be considered, it cannot be completed by anyone related to the student.*

Name of Student: _____

Name of School: _____

Please rate the student according to the following list of ten characteristics. This list reflects factors which research has shown are important to successful intercultural adjustment. **(1 = Low, 5 = High)**

Open-mindedness & resourcefulness	1	2	3	4	5
Sense of humor	1	2	3	4	5
Resilience: ability to cope with failure	1	2	3	4	5
Communicativeness	1	2	3	4	5
Flexibility and adaptability	1	2	3	4	5
Curiosity	1	2	3	4	5
Sets positive and realistic expectations	1	2	3	4	5
Tolerance for differences	1	2	3	4	5
Social maturity	1	2	3	4	5
Self-Esteem	1	2	3	4	5

1) How long and in what context have you known this student?

(More questions on the following page)

2) Please comment on the student’s maturity and character and give your opinion of her/his ability to handle the pace and intensity of being in an unfamiliar environment while representing her/his school and the U.S.

3) Do you know of any reasons (behavioral, emotional or otherwise) whereby this student should not participate in this program?

Signature: _____ Date: _____

Printed Name: _____ Position: _____

Phone: _____ Email Address: _____

If you would like to include additional information in the form of a letter, you are welcome to do so. However, we ask that you still complete this form (2 pages) and include it with your recommendation.

Questions or concerns may be routed to:
Japan Center for Michigan Universities (JCMU)
TEL: 517-355-4654 | EMAIL: hs@jcmu.org

Thank you for your assistance with this selection process!