



## Michigan-Shiga High School Exchange Teacher Recommendation Form

Your student (current or former) 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 an exchange partner for two weeks in Michigan in the fall. Please answer the questions provided regarding your student's 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 the completed 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	Poor	1	2	3	4	5	Excellent
Sense of humor	Poor	1	2	3	4	5	Excellent
Resilience: ability to cope with failure	Poor	1	2	3	4	5	Excellent
Communicativeness	Poor	1	2	3	4	5	Excellent
Flexibility and adaptability	Poor	1	2	3	4	5	Excellent
Curiosity	Poor	1	2	3	4	5	Excellent
Sets positive and realistic expectations	Poor	1	2	3	4	5	Excellent
Tolerance for differences	Poor	1	2	3	4	5	Excellent
Social maturity	Poor	1	2	3	4	5	Excellent
Self-Esteem	Poor	1	2	3	4	5	Excellent

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

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(More questions on the following page)

2) Please comment on the student's maturity and character.

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3) Do you know of any reasons (behavioral, emotional, etc.) why this student should not participate in this program?

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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](mailto:hs@jcmu.org)

**Thank you for your assistance with this selection process!**