

Family Reference

I. To be filled out by applicant's parents/guardian

_____ (Student's name) has applied for admission at CNG to grade ____.
His/her parents / guardian(s) are: _____ and _____.

II. To be filled out by the person referring the applicant and his/her family

Your assistance with our admissions process by completing this form is greatly appreciated. Please answer the following (if more space is needed please attach another sheet). **CONFIDENTIAL** -Please return directly to CNG Admissions Office, Cra 2E No. 70-20 or email admissions@cng.edu .

1. How long have you known this family?

2. How do you know them? As a couple the father the mother the child.

3. Your relationship with them? Work Personal Family (specify)

4. What activities do you share with them?

5. What adjectives come to mind when you think of them?

6. English Language Proficiency of father	Spoken	<input type="checkbox"/> None	<input type="checkbox"/> Low	<input type="checkbox"/> Med.	<input type="checkbox"/> Good	<input type="checkbox"/> Native
	Written	<input type="checkbox"/> None	<input type="checkbox"/> Low	<input type="checkbox"/> Med.	<input type="checkbox"/> Good	<input type="checkbox"/> Native
7. English Language Proficiency of mother	Spoken	<input type="checkbox"/> None	<input type="checkbox"/> Low	<input type="checkbox"/> Med.	<input type="checkbox"/> Good	<input type="checkbox"/> Native
	Written	<input type="checkbox"/> None	<input type="checkbox"/> Low	<input type="checkbox"/> Med.	<input type="checkbox"/> Good	<input type="checkbox"/> Native

8. Experience of US or international culture – Father:

9. Experience of US or international culture – Mother:

10. How will this family fit in with the CNG community?

11. How will this family contribute to the CNG community?

12. How well do you know their child?



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R-ADM-19
August 27, 2018
Version 1

Please include any additional comments that will assist us in making an accurate assessment of this student and family as a candidate for admission to our school. Thank you for completing this CONFIDENTIAL form for the exclusive use of the Admissions Committee. We appreciate your help.

Signature _____ Date: _____

Name: _____

Contact Phone: _____

Email(s): _____

CNG Background:

- Employee
- Existing Family; Fam.Code: _____
- Alumni Class of: _____
- Other: