

Information about the student			
Student's name			
Permanent code (if available)			
School level	<input type="checkbox"/> Grade 6 (<i>preinscription</i>) Parent's name: _____ Phone number: _____ Elementary school : _____	<input type="checkbox"/> Particular pathway <input type="checkbox"/> Secondary 1 <input type="checkbox"/> Secondary 2 <input type="checkbox"/> Secondary 3 <input type="checkbox"/> Secondary 4 <input type="checkbox"/> Secondary 5	
Information about the secondary school			
School attended	<input type="checkbox"/> Jean-du-Nord <input type="checkbox"/> Manikoutai <input type="checkbox"/> Queen Elizabeth High School		
Information about the person making the recommendation			
Referrer name			
Role and/or relationship with the youth			
Organization			
Phone and Email			
<input type="checkbox"/> I have received verbal authorization to transmit the information contained in this form to the team of Passport pour ma réussite (by the young person aged 14 and over or his parental authority)			
Signature of the referee:		Date:	
Reasons for recommendation			
SCHOOL FACTORS	Protection factor	Risk factor	Explications
Academic delay (number of years)	<input type="checkbox"/>	<input type="checkbox"/>	
Academic performance reading, writing and mathematics <i>(ex: significant decrease in academic results, failure, work not submitted/completed)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Absenteeism and/or frequent lateness	<input type="checkbox"/>	<input type="checkbox"/>	
Academic and professional aspirations	<input type="checkbox"/>	<input type="checkbox"/>	
Attitude and perception towards school	<input type="checkbox"/>	<input type="checkbox"/>	
Motivation and commitment <i>(ex: effort, level of participation)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
School climate <i>(ex: student witnessing unruly behavior, problematic dynamics or bullying)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Participation in extracurricular activities	<input type="checkbox"/>	<input type="checkbox"/>	
Relationship with teachers and non-teaching staff	<input type="checkbox"/>	<input type="checkbox"/>	

SOCIAL FACTORS	Protection factor	Risk factor	Explications
Relationship with peers	<input type="checkbox"/>	<input type="checkbox"/>	
Social conduct <i>(ex: respect, politeness, punctuality, extremist, racist or sexist remarks)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Community/Family resources <i>(ex: no school materials, financial difficulties, waiting for specialized services)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Unhealthy friendship or relationship	<input type="checkbox"/>	<input type="checkbox"/>	
Sector of residence <i>(ex: home away from school and services)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Participation in sports and cultural activities	<input type="checkbox"/>	<input type="checkbox"/>	
PERSONAL FACTORS	Protection factor	Risk factor	Explications
Self esteem <i>(ex: ability to assert oneself and communicate, self-knowledge, perception of skills)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Autonomy <i>(ex: personal hygiene, homework, planning and organization)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Auto control <i>(ex: management of emotions/frustrations)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Behaviours <i>(ex: isolation, aggressiveness, violence)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Life habits <i>(ex: diet, physical activity, sleep, screen time, drug/cannabis/tobacco/alcohol/caffeine/energy drink)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Resilience capacity <i>(ex: adaptation strategies, problem solving, signs of depression/anxiety)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Work-study balance <i>(ex: prioritization, planning and organization)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
FAMILY FACTORS	Protection factor	Risk factor	Explications
Importance given to education <i>(ex: educational aspirations, low or high parental expectations, perception of abilities, valuation of graduation)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Parental involvement <i>(ex: collaboration and interaction with school environment, participation, supervision, support)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Other comments relevant to the recommendation			

Follow-up #1 : _____

Follow-up #2 : _____

Follow-up #3 : _____