

## 2026-27 Teacher Recommendation Form

This form must be sent directly by the teacher/school to AICF by e-mail to: [milga@aicf.org](mailto:milga@aicf.org)

This recommendation will be taken into consideration when evaluating the candidate's application.

This recommendation remains confidential and will be used only by the AICF office.

**Field:** Music / Dance                      **Instrument/expertise:** \_\_\_\_\_

Applicant's Full Name: \_\_\_\_\_

Applicant's ID Number: 

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Teacher's Full Name: \_\_\_\_\_ Profession: \_\_\_\_\_

Teacher's Email Address: \_\_\_\_\_

Number of years you have been teaching the candidate \_\_\_\_\_

Please describe the candidate (talent, work ethic, personality, special remarks, etc.)

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Teacher's Name \_\_\_\_\_ Teacher's Signature \_\_\_\_\_

The name of the Institution \_\_\_\_\_

Signature from the institution \_\_\_\_\_

Date \_\_\_\_\_