



**Programmes Interculturels
Suisse**

Certificat scolaire– School Certificat

Name of school: _____

Name of person in charge for exchange students: _____

Name of teacher : _____

Name of Student : _____

Period : _____

Subject	Lessons per week	Effort	Achievement
German			
French			
Italian			
English			
Spanish			
History			
Geography			
Mathematics			
Physics			
Chemistry			
Descriptive Geometry			
Informatics			
Biology			
Art			
Music			
Choir			
Physical Education			

Je souhaite qu' un responsable AFS prenne contact avec moi .

Grading System

6 = excellent 5 = good 4 = satisfactory 3 = poor
 5-6 = very god 4-5 = quite good 3-4 = failing 2 = very poor

Remarks: _____

**Nous vous prions de nous renvoyer ce formulaire dès que possible à l'adresse:
 AFS Programmes Interculturels Suisse, Kernstrasse 57, 8004 Zurich**

Merci pour votre collaboration!

Date: _____ Signature et tampon : _____

