



Teacher Recommendation Form

For Grades 2 through 6

Name of Applicant _____ Date of birth: _____

Applying for Grade: 2 3 4 5 6 Applying for school year _____ Male Female

Teacher:

Your insights and observations are important in helping to determine appropriate independent school placement for the child and the family so that his/her aspirations can best be reached. Please know that the professional comments you share will be held in strictest confidence and will be made available only to admission and guidance officers of the school. This form will not become a part of the student's permanent records.

Personal Attributes	Outstanding	Above Average	Average	Below Average
Conduct				
Attitude and cooperation				
Character and integrity				
Peer relationships				
Responsibility for personal actions				
Concern for others				
Respect for adults				
Leadership				

Comments

Academics	Outstanding	Above Average	Average	Below Average
Academic ability				
Achievement in relation to potential				
Intellectual curiosity				

Comments

Study Skills	Consistently	Usually	Sometimes	Rarely
Able to work independently				
Follows directions				
Is organized				
Demonstrates attention span				
Participates and shows interest				
Works well in a group				
Completes classwork assignments on time				
Completes homework assignments on time				

Comments

Family Information	Consistently	Usually	Sometimes	Rarely
Communicates openly with school				
Participates in school activities				
Cooperates with classroom teachers				
Follows the rules and policies of the school				

Comments

Has this student ever been involved in disciplinary action(s)? If yes, please explain:

Administrative comment (optional)

Name _____ Position _____
Signature _____ Date _____
School _____ Phone _____
School address _____

Note: I agree and understand that my typed signature is the equivalent of my manual/handwritten signature.

Please email completed form to:
Vivian Bradford
Director of Admission & Enrollment
vbradford@sjeds.org