

KINDERGARTEN TEACHER RECOMMENDATION



TO THE PARENT OR GUARDIAN

My child is an applicant for admission to Summit Christian Academy of Cedar Park. We waive our right of access to this teacher recommendation form.

I understand it will not become part of the permanent file, nor will it be forwarded to other schools. I ask that the teacher complete this evaluation and either **scan and email, or mail it directly to the Office of Admissions.**

Student's Name _____

Applying for Grade _____

Parent/Guardian Signature _____

TO THE TEACHER

Thank you for taking the time to complete this recommendation. All information will be considered strictly confidential. Upon completion please either **scan and email, or mail it directly to the Office of Admissions.**

Teacher's Name _____

Date _____

Course Title _____

I am currently teaching this student: Yes No

I have known this applicant for _____ years.

I have been teaching for _____ years.

	Below Expectations	Average	Good	Exceptional	N/A
ACADEMIC PERFORMANCE					
Attention span	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fine motor skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gross motor skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neatness/organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number recognition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Counting skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Math skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Letter recognition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phonic awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beginning reading skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PERSONAL CHARACTERISTICS					
Emotional maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Separates easily from parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude towards authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accepts responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to obey	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to correction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer relations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Positive leadership qualities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PLEASE CIRCLE THE WORDS THAT BEST DESCRIBE THIS APPLICANT

Aggressive	Disobedient	Irritable	Organized	Self-disciplined
Anxious	Easily discouraged	Manipulative	Over-protected	Shy
Articulate	Follower	Mature	Perfectionist	Social
Cheerful	Helpful	Motivated	Positive leader	Vivacious
Confident	Honest	Negative leader	Responsible	Well-liked
Conscientious	Immature	Oppositional	Self-centered	Witty

PLEASE COMMENT ON THE FOLLOWING:

Parental support/involvement: Very helpful Helpful Not very helpful

Comments:

Does this applicant receive accommodations or has outside help been recommended? Yes No

If yes, please explain:

Student is absent: Rarely Occasionally Frequently

Student is tardy: Rarely Occasionally Frequently

Please describe a situation/occurrence that illustrates the applicant's character:

PLEASE SELECT FROM ONE OF THE FOLLOWING RECOMMENDATIONS:

- Highly recommend
- Recommend
- Recommend with reservation because:
- Do not recommend because:

Teacher's Signature _____

School _____

Address _____

City _____ State _____ Zip _____