

TEACHER RECOMMENDATION GRADES 1-5



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					
Ability to be attentive	<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"/>
Completes work on time	<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"/>
Reading comprehension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading fluency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Computation skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Math facts mastery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical thinking 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"/>
Works cooperatively with others	<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 _____

Email _____

Phone () _____