



Teacher recommendation form

I/We understand that we may not look at this evaluation and assure the evaluator and the school that we will not try to do so. We give permission for the evaluator to release the information on this form to the schools to which we are applying for admission. **We understand that as parents we will not have access to this confidential information and that it will not become part of our child's permanent record.**

First Parent/Guardian Signature _____

Second Parent/Guardian Signature _____

Name of Student _____ has applied for grade _____

To the Evaluator: Please complete both sides of this form and return it to the address above. Your comments will be held in strictest confidence. Thank you very much for your cooperation and assistance.

How long have you known the candidate and in what connection? _____

Please list subject taught, including level of difficulty _____

Please list the textbook used, if applicable _____

Academic Qualities

Academic ability

- Outstanding
- Good
- Average
- Below average

Intellectual curiosity

- Strong and varied
- Good
- An occasional spark
- Limited

Written expression of ideas

- Ideas and mechanics excellent
- Ideas good, mechanics good
- Ideas good, mechanics fair
- Ideas fair, mechanics good
- Ideas and mechanics poor

Academic achievement

- Outstanding
- Good
- Average
- Below average

Ability to work with others

- Always works well
- Usually effective
- Sometimes unable to cope
- Has great difficulty in a group

Oral expression of ideas

- Exceptional
- Good
- Only when called on
- Wants to dominate
- Rarely contributes

Effort and drive

- Outstanding
- Good
- Sporadic
- Occasional

Ability to work independently

- Always works alone
- Needs help occasionally
- Needs help frequently
- Requires supervision

Seeks help when needed

- Always
- Sometimes
- Never

Study habits

- Well organized
- Organized
- Easily distracted
- Poor

Concentration

- Exceptional
- Usually good
- Occasionally distracted
- Easily distracted

Uses Suggestions

- Always
- Usually
- Sometimes
- Rarely

Personality Traits

CIRCLE all the words that best describe the student

- Aggressive
- Anxious
- Articulate
- Assertive
- Cheerful
- Confident
- Conscientious
- Disobedient
- Easily discouraged
- Follower
- Helpful
- Honest
- Influential
- Irritable
- Manipulative
- Motivated
- Negative leader
- Over-protected
- Passive aggressive
- Perfectionist
- Positive leader
- Responsible
- Self-centered
- Self-disciplined
- Shy
- Social
- Vivacious
- Well-liked

Personal Qualities

Maturity

- Very mature
- Appropriate
- Somewhat immature
- Very immature

Social adjustments with peers

- Healthy relationships
- Occasional minor problems
- Frequent minor problems
- Relates poorly

Self-confidence

- Has healthy self-image
- Needs some support
- Appears overly confident
- Needs much reassurance

Consideration of others

- Unusually thoughtful
- Usually considerate
- Rarely considerate
- Selfish

Sense of humor

- Delightful
- Good
- Inappropriate
- Humorless

Integrity

- Very trustworthy
- Usually trustworthy
- Occasionally trustworthy
- Untrustworthy

Attitude of parents

- Cooperative
- Uninvolved
- Overly protective
- Antagonistic

Conduct

- Well-behaved
- Usually obeys rules
- Occasionally misbehaves
- Frequently misbehaves

(continues...)

Please comments on each of the following regarding this child. Attach a separate page for additional comments.

Academic Strengths and Weaknesses. Comment concerning writing ability, math skills or other skills appropriate to your subject area will be especially helpful. Consider such categories as effort, curiosity, motivation, achievement in relation to potential, class participation, and homework preparation.

Emotional Maturity: self-confidence, respect for limits and routine, compliance, ability to make transitions, and response to frustration.

Personal Qualities: leadership, honesty, responsibility, concern for others, and a sense of humor.

Is there anything else the school should know as this student is considered for admission?

Do you have any additional information that may be helpful in our evaluation of this student?

May we contact you for further information? Yes No

Teacher's Name _____

Position _____ School Name _____

School Address _____

Phone _____ Email _____

Signature _____ Date _____

Thank you for taking the time to complete this evaluation. **Please send a copy to the school, and keep an original for your records.**

Mail directly to: Joanne Kiel. The Bryn Athyn Church School. PO Box 277. Bryn Athyn, PA 19009