



**Recommendation Form**

**Student:**

Please type or print your name and parents name in the space below and give this form to your principal, Counselor, English teacher, or math teacher.

Name of Student: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Parent: \_\_\_\_\_

**Principal/Counselor/teacher:**

This recommendation will remain confidential and will not become part of the student's permanent record. If you prefer, you may type and attach your responses on separate sheets of paper. When you have completed the form, please make a photocopy, put the original in the sealed envelope, and hand it to the student. Thank you for your cooperation and candor.

Name and Title of Principal/ Counselor/Teacher: \_\_\_\_\_

**Academic and Personal Qualities**

How long have you known the student? \_\_\_\_\_

How many students are in the applicant's entire grade? \_\_\_\_\_

What are the first three words that come to mind to describe this student? \_\_\_\_\_

Has the student ever been a disciplinary problem? If yes, briefly explain, noting any disciplinary action taken. \_\_\_\_\_

Has the student advanced to the next grade annually? If no, please explain. \_\_\_\_\_

How would you rank the student in the following areas compared with students of the same age?

	Truly Outstanding(Top 5%)	Excellent	Good	Average	Below Average
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential for Growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Summary Evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are the student's strengths? \_\_\_\_\_

In which areas does this student need improvement? \_\_\_\_\_

Does the student attend class regularly?  Yes  No

Is there a problem with tardiness?  Yes  No

If so, please explain:

How well does the student accept advice or criticism?

If the student handed in a paper late, it would probably be because the student:

Procrastinates  Has many other activities  Student's work is never late

Strives for perfection of expression  Lost the rough draft  Other, please explain

Which words best describe the student's thinking?

Imitative  Independent  Creative  Other

Does this student have any particular interests or abilities you would like to share with us?

Please check if this student is participating in any programs or services listed below.

Behavior Management  Occupational Therapy  IEP

ESOL/ESL (English as a Second Language/English for Speakers of Other Languages)  Remedial/Learning Support

Gifted/Gifted and Talented  Speech/Language Therapy  Individual/Family Counseling

Other ( )

Describe any of the programs checked above. (Attach a separate sheet if necessary.)

Within your range of experiences, how would you rate the student?

Truly Outstanding (Top 5%)  Excellent  Good  Average  Below Average

Is there any other information that would be helpful to us in evaluating the ability of this student to perform at Keimei Gakuen?

### Parent/School Relationship

Parents are important part of our relationship with the student. Please share with us any thoughts you have regarding this family.

Are you aware of any family circumstances that affect the student's life at school?

Which word(s) best describe the parents in regard to their child?

Supportive  Demanding  Controlling  Indifferent  Other

Additional Comments:

If we have additional questions, may we call you?  Yes  No

If yes, phone number (include area code):

Most convenient time to call is:

Signature Date

Thank you for your time and expertise in completing this form.