



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?

	<i>Truly Outstanding(Top 5%)</i>	<i>Excellent</i>	<i>Good</i>	<i>Average</i>	<i>Below Average</i>
<i>Character</i>	☐	☐	☐	☐	☐
<i>Intellectual Curiosity</i>	☐	☐	☐	☐	☐
<i>Potential for Growth</i>	☐	☐	☐	☐	☐
<i>Summary Evaluation</i>	☐	☐	☐	☐	☐

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.