



**TEACHER RECOMMENDATION FORM**

Applicant's Name: \_\_\_\_\_ Applying to Grade: \_\_\_\_\_

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

In what capacity do you know the applicant? \_\_\_\_\_

What adjectives come to mind when you think of this applicant? \_\_\_\_\_

Please check the appropriate rating below:

|                                  | Superior | Good | Average | Below Average | Poor |
|----------------------------------|----------|------|---------|---------------|------|
| <b>SOCIAL DEVELOPMENT</b>        |          |      |         |               |      |
| Attention Span                   |          |      |         |               |      |
| Ability to Follow Directions     |          |      |         |               |      |
| Ability to Complete Tasks        |          |      |         |               |      |
| Ability to Work in a Group       |          |      |         |               |      |
| Attitude Toward Teachers         |          |      |         |               |      |
| Attitude Toward Peers            |          |      |         |               |      |
| Confidence                       |          |      |         |               |      |
| Ability to Communicate           |          |      |         |               |      |
| Assumption of Responsibility     |          |      |         |               |      |
| Conduct                          |          |      |         |               |      |
| <b>ACADEMIC PERFORMANCE</b>      |          |      |         |               |      |
| Reading Skills                   |          |      |         |               |      |
| Writing Skills                   |          |      |         |               |      |
| Language Ability                 |          |      |         |               |      |
| Math – Facts & Computation       |          |      |         |               |      |
| Math – Problem Solving Skills    |          |      |         |               |      |
| Work Ethic                       |          |      |         |               |      |
| Organizational Skills            |          |      |         |               |      |
| <b>FAMILY</b>                    |          |      |         |               |      |
| Supports Child and His/Her Needs |          |      |         |               |      |
| Supports School and Teacher      |          |      |         |               |      |
| Attendance                       |          |      |         |               |      |
| Health                           |          |      |         |               |      |

|                                    |     |    |
|------------------------------------|-----|----|
| Has outside help been recommended? | Yes | No |
| Has outside help been given?       | Yes | No |

Please comment briefly on the following:

Applicant's social and/or emotional development as compared with is/her peers: \_\_\_\_\_

\_\_\_\_\_

Applicant's greatest strengths: \_\_\_\_\_

\_\_\_\_\_

Applicant's limitations, disabilities, or special needs: \_\_\_\_\_

\_\_\_\_\_

Parental expectations, support, and attitude toward child: \_\_\_\_\_

\_\_\_\_\_

Parental expectations and support of school: \_\_\_\_\_

\_\_\_\_\_

Additional comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The student has been enrolled in this school for \_\_\_\_\_ years. I have known this student for \_\_\_\_\_ years.

Teacher's Name: \_\_\_\_\_ Position: \_\_\_\_\_

Teacher's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_ Address: \_\_\_\_\_

Thank you for completing this recommendation form. All information will be considered strictly confidential. Please UPLOAD this document to the Gradelink- EnrollMe application.