



TEACHER RECOMMENDATION FORM

FOR APPLICANTS TO GRADE TWO AND ABOVE
PLEASE GIVE TO CURRENT SCHOOL

Student's Name _____

Applicant for Grade _____

School

Address

Teacher

Phone Number

How long have you known this student?

What subjects have you taught this student?

Have you known the student in any capacity outside of the classroom? Yes No If so, please describe:

What are the first words that come to mind to describe this candidate?

To help us compile a profile of this student, please check the following categories, adding comments wherever appropriate.

| | Excellent | Good | Fair | Poor | Comments |
|---------------------------------|-----------|------|------|------|----------|
| Sense of Responsibility | | | | | |
| Consideration for Others | | | | | |
| Peer Relationships | | | | | |
| Leadership Skills | | | | | |
| Emotional Maturity | | | | | |
| Self-Confidence | | | | | |
| Sense of Humor | | | | | |
| Self Control | | | | | |
| Relationship with Adults | | | | | |
| Study Habits | | | | | |
| Self-Motivation | | | | | |
| Organization of Time/Work | | | | | |
| Intellectual Curiosity | | | | | |
| Attention Span | | | | | |
| Ability to Express Ideas Orally | | | | | |
| Ability to Follow Directions | | | | | |
| Ability to Work in a Group | | | | | |
| Ability to Work Independently | | | | | |
| Perseverance | | | | | |
| Academic Promise | | | | | |
| Academic Achievement | | | | | |

Reads for Pleasure Frequently Occasionally Seldom Never

In what, if any, subject areas does she show particular strength?

In what, if any, subject areas has she needed special support or help?

This student's work level is considered the Lower Middle Upper Third of the Class.

Has she displayed any notable interests or talents?

Please comment on her creativity.

Are there any concerns about attendance or promptness?

Please characterize the parent/guardian cooperation and involvement.

Is there any other information about this student or her family which would be helpful for us to know? *You may attach an additional sheet.*

Signature

Date

Name (please print)

Title

We thank you for taking the time to aid us in understanding the candidate better. All information will be considered confidential. Please mail the form no later than January 9th to the address below, or you may fax it to (212) 996-1784.

Convent of the Sacred Heart
Admissions Office
1 East 91st Street
New York, NY 10128-0689

If you have any questions or comments, please contact the Admissions Office at (212) 722-4745.