

Middle School Recommendation Form

Student Name _____ Current Grade _____
Name of Evaluator _____
School and Position _____ teaching subject _____
Phone _____ Fax _____
E-mail address _____
How long have you known the student? _____

Academic Qualities	Excellent	Good	Fair	Below Average
Study Habits				
Motivation				
Ability to Learn				
Oral Communication Skills				
Ability to Work Independently				
Ability to Work Cooperatively				
Intellectual Curiosity				
Attention Span				

Personal Qualities	Excellent	Good	Fair	Below Average
Deals with Personal Conflicts				
Self Confidence				
Leadership Potential				
Concern for Others				
Participation in the School Community				
Respect for Authority				
Creativity				
Respect Accorded by His/Her Peers				

Has this child been enrolled in an English as a Second Language (ESL) program at your school NO ____ YES ____ If yes, beginning date : _____ Date of completion : _____
Has this child been referred for any type of learning, attention, or behavioral differences ? NO ____ YES ____ If yes, please list and describe the results of testing and any remediation or treatment : _____

< Class Rank > Please check the appropriate box.

Upper 5%	Upper 10%	Upper 20%	Upper 30%	Others

Your comments about any educational, physical, social, or behavioral concerns about the student.

Please comment on the student's extra-curricular activities.

Please make any comments that you feel would be appropriate in helping us evaluate this student's promise for success in a challenging, college-preparatory academic program.

Please circle the appropriate number to indicate the extent to which you think the student is willing and able to succeed as a student.

1	2	3	4	5	6	7	8	9
Probably would fail	Probably would have some academic difficulty			Probably would make a satisfactory record	Probably would make a better than average record			Probably would make a superior record

1	2	3	4	5	6	7	8	9
Not recommended	Recommended with reservation			Recommended without reservation	Recommended with confidence			Recommendation with confidence and enthusiasm

Date : _____ **Evaluator's Signature :** _____