ADMINISTRATIVE RECOMMENDATION

Your candid assessment of this student will have a bearing on our admission decision, and your insights will remain confidential. Thank you for your thoughtful consideration and comments.

THIS IS A CONFIDENTIAL FORM

STUDENT INFORMATION

<table>
<thead>
<tr>
<th>first</th>
<th>middle</th>
<th>last</th>
</tr>
</thead>
</table>

Current Grade ___________________________

Application to ____________________________ For Grade ________ School Year ________________________

name of school

Relationship to Student ____________________________ How long have you known this student? ________ (months/years)

(e.g. guidance counselor)

Please check the appropriate answer and provide explanations if you check “Yes” to any of the following:

Are there any special strengths or talents that this student contributes to your school? ☐ Yes ☐ No
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________

Are there any special circumstances or problems of which we should be aware? ☐ Yes ☐ No
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________

Has the student ever been involved in a serious infraction of school rules? ☐ Yes ☐ No
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________

Have any specific learning differences been noted? If so, have any modifications been made to the student’s academic program to help her cope with learning differences? ☐ Yes ☐ No
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
Has any outside testing been administered in the last two years?  
☐ Yes  ☐ No  
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________

Have the parents had a positive relationship with the school?  
☐ Yes  ☐ No  
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________

PLEASE INDICATE THE FAMILY’S RELATIONSHIP WITH THE SCHOOL IN THE FOLLOWING AREAS:

Cooperation with school regulations
☐ Always  ☐ Usually  ☐ Sometimes  ☐ Rarely

Cooperation with faculty/administration
☐ Always  ☐ Usually  ☐ Sometimes  ☐ Rarely

Communication with school
☐ Always  ☐ Usually  ☐ Sometimes  ☐ Rarely

Participation in school community
☐ Always  ☐ Usually  ☐ Sometimes  ☐ Rarely

Fulfillment of financial responsibilities
☐ Always  ☐ Usually  ☐ Sometimes  ☐ Rarely

Involvement in student’s education
☐ Always  ☐ Usually  ☐ Sometimes  ☐ Rarely

Parental expectations for student
☐ Realistic  ☐ Unrealistic  ☐ Unknown  ☐

PLEASE ADD ANY COMMENTS WHICH MAY HELP US KNOW THE STUDENT BETTER:
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________________

I recommend this student:  ☐ Enthusiastically  ☐ Strongly  ☐ Neutrally  ☐ With Reservation  ☐ Not At All

_____________________________  ______________________________  _______________________
Signature of Administrator  Name and Title (please print)  Date
_____________________________  _______________________
School  Address