

Confidential Student Recommendation Grades 1-8

Student Name _____ Applying for Grade _____

How long have you known the student? _____ What courses do/did you teach him/her? _____

What is/was your relationship to the student? ___ Current teacher ___ Former teacher ___ Principal ___ Other _____

What are the first words that come to mind in describing this student?

What are his/her special interests?

For the following items, please mark one or more responses. You may adjust the placement of the check mark to the left or right within a given section to indicate graduations in your evaluation.

	Excellent	Good	Fair	Poor
Conduct				
Consideration of others				
Social relationships with peers				
Leadership ability				
Emotional maturity				
Self-confidence				
Sense of humor				
Integrity				
Sense of responsibility				
Relationships with adults				
Participation in extracurricular activities				
Self-motivation				
Organization of time and 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				
Study habits				
Academic promise				
Academic achievement				
Attendance				
Parent cooperation				
Parent involvement in the school				

(Teacher or principal only.)

We appreciate additional comments or observations concerning the strengths, weaknesses, health, or special needs of this student, or any other information you think would be helpful. Please use a separate sheet of paper or the back of this sheet for further comments in any category.

Thank you for your time.

Please return Recommendation Form to:

*Oeness-Family School
Attn: Office of Admissions
6701 Wisconsin Ave.
Chevy Chase, MD 20815*

Revised 02-22-09

School Name (if applicable) _____ Email _____

Address _____ Telephone _____

Signature _____ Print or type name _____ Date _____