

## Teacher Recommendation Form

My son/daughter is applying for admission to Sullins Academy. I would appreciate you completing this form and returning it directly to the Director of Admissions at Sullins Academy. I hereby authorize the release of my child's records and evaluative data.

Student Name	Applying for Grade
Current School	Grade
Current School Phone	
Parent Signature	Date

**To the applicant's teacher:**

We would appreciate your evaluation of the above student in the areas below. When completed, we ask that you email or mail to the Sullins Academy Admissions Office, where it will be placed in a confidential file. We are thankful for your time in completing this form.

\*Circle one per statement.

<b>Academic Ability</b>	Exceptional	Above Average	Average	Lower Marginal Ability	Poor Academic Risk
<b>Initiative, Drive</b>	Outstanding, Resourceful	Well Above Average	Generally Strong	Occasionally Weak or Lacking	Very Weak
<b>Leadership &amp; Responsibility</b>	Outstanding, Top Positions	Commendable Next to Top Positions	Capable, Minor Positions	No Sign of Leadership or Involvement	Record of Irresponsibility
<b>Interest in Non-Academic Activities</b>	Outstanding	Commendable	Active	Minor Participation	No Participation
<b>Parental Support</b>	Exceptional	Good	Average	Sometimes Unsupportive	Unsupportive, Critical of School
<b>Peer Relationships</b>	Highly respected, well-liked	Respected, Liked	Accepted, but not sought out	Some difficulty in cultivating relationships	Unskilled interpersonally

<b>Personal Qualities</b>	Superior Personal Qualities	Great Strengths	Strengths Outweigh Weakness	Somewhat Immature for Age	Very Immature for Age
<b>Emotional</b>	Extremely Well balanced	Well Balanced	Usually No Problems	Some problems	Many Problems
<b>Summary as a Student</b>	Outstanding	Above Average	Average	Below Average	Poor

## ACADEMIC ABILITY

<b>Reading Skills</b>	Superior	Good	Average	Below Average	Poor
<b>Writing Skills</b>	Superior	Good	Average	Below Average	Poor
<b>Math Computation Skills</b>	Superior	Good	Average	Below Average	Poor
<b>Math Critical Thinking Skills</b>	Superior	Good	Average	Below Average	Poor
<b>Prediction of Success at Next Grade Level?</b>	Superior	Good	Average	Below Average	Poor
<b>Would you recommend this student for an Honors Course?</b>	YES	NO			
<b>Has outside help been recommended?</b>	YES	NO			

## STUDY HABITS

<b>Ability to work independently</b>	Superior	Good	Average	Below Average	Poor
<b>Ability to work with others</b>	Superior	Good	Average	Below Average	Poor
<b>Pattern of completing work on time</b>	Superior	Good	Average	Below Average	Poor
<b>Attention Span</b>	Superior	Good	Average	Below Average	Poor
<b>Organization/Care of materials</b>	Superior	Good	Average	Below Average	Poor

Thank you for submitting a recommendation for this applicant to Sullins Academy. The information you have provided is confidential and will not be available to the applicant or their parents.

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Teacher Name (please print) \_\_\_\_\_ Title \_\_\_\_\_

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Signature \_\_\_\_\_ Date \_\_\_\_\_

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School Address \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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School Phone \_\_\_\_\_