

Uses suggestions or corrections ___Sometimes

Teacher Recommendation

Note to Administrator: Please do not give this back to the student, but send directly to St. Clare of Assisi School. Last Middle First Mailing Address: School now attending: _____ Applicant: Complete the information above, and then give this form to your teacher at the school you are now attending. Teacher: The above student has applied for admission to St. Clare of Assisi School. The admissions committee finds candid evaluations helpful in choosing among highly qualified candidates, and appreciates receiving your confidential assessment of this student's strengths and needs. Please complete both sides of this sheet and return it as promptly as possible to: St. Clare of Assisi School, 31622 Highway 6, Edwards, CO 81632. You may also fax it to: 970-926-8973 Please check the appropriate ratings. Not applicable may be used in areas where there is insufficient information. Please rank the above applicant over all as: Low High Average Accelerated Motivation Occasional Moderate Maximum Ability to work alone Needs help frequently Needs help occasional Frequently works well Leadership conduct A follower, lead when Seeks opportunities Is a natural leader ___Occasional misconduct ___Good conduct Classroom conduct Usually good behavior ___Sometimes Cooperates with adults ___Usually ___Nearly always Personal/social adjustment Fluctuating peer Relates poorly with others Healthy peer relationships relationships Sometimes able to cope Ability to work in a group ___Usually effective ___Frequently works well Joins in readily Participation in discussion Contributes when called on Volunteers occasionally ___Good Ability to express ideas orally Has some difficulty Exceptionally good ___Usually well Use of time Occasionally well ___Often effectively __ Fair Organization of work _Average Excellent Needs much explanation Needs occasional help Responds quickly **Follows directions Consideration of others** Occasionally considerate Very thoughtful Usually Initiative (wholesome) Sometimes Occasionally ___Frequently **Fulfills responsibilities** Nearly always Sometimes _Usually

Usually

Frequently

	****	*******	
Signature:			
Position:			
Phone:			
Name (please print):		
	With Reservations	I do not recommend this candidate	
	Enthusiastically	Confidently	
recommend this a	pplicant for admission to St. Cla	re of Assisi School	
Please list any acco	ommodations or modifications fo	or the student's learning that we should be aware	e of.
Please comment or	n any emotional, social, physical	l, or hearing disability problems of which we sho	uld be aware.
What do you consid	der to be the student's greatest s	strength academically and personally?	
Evaluation: What are the first w	ords that come to mind to descr	ribe the applicant?	
Note any capacity i	n which you have known the ap	plicant outside of the classroom (advisor, family	friend, etc.).
Background Information How long have you	mation: known the applicant?		
las the applicant e (If yes, please expl		se punished for violations of a school rule?	NoYes

CONFIDENTIALITY

We value your comments highly and ask that you complete this form in the knowledge that it may be retained in the student's file. In accordance with the Family Educational Rights and Rights and Privacy Act of 1974, students 18 years and older have access to their permanent files which may include forms such as this one. St. Clare of Assisi School does not provide access to admissions records to applicants, those students who are rejected, or those who decline and offer of admission. Again, your comments are important to us, and we thank you for your cooperation. St. Clare of Assisi School does not discriminate on the basis of race, color, nation or ethnic origin in admitting students to its programs or in the administration of its educational policies, scholarships and loan programs, and athletic and other school administered programs.