

INDEPENDENT SCHOOL STUDENT RECOMMENDATION
Entering Grades 2-8

Name of Student _____ Application for Grade _____

I have known this candidate for _____ months/years.

My relationship has been that of _____

To the Teacher or School Director: We appreciate your cooperation in completing this form. The items below ask for your sense of this student's relationships within the school community, emotional and social growth, and intellectual development. Your insight will help us to get to know the child. We understand the difficulty in evaluating a student, and are fully aware that children are constantly growing, changing and developing. Thank you for your help.

What are the first words which come to mind in order to describe this candidate?

What are the applicant's special interests?

Please circle your response

| | | | | |
|--|-----------------------|-------------------------------|------------------------|---------------------|
| Conduct | good conduct | usually good behavior | occasional misconduct | frequent disruption |
| Consideration for others | unusually thoughtful | usually considerate | inconsiderate | unkind |
| Social relationship with peers | healthy relationships | has occasional minor problems | | relates poorly |
| Leadership ability | excellent | good | average | poor |
| Emotional maturity | very mature | average | somewhat immature | very immature |
| Self-confidence | healthy self-image | needs some support | seems overly confident | poor self-image |
| Sense of humor | highly developed | good | | poorly developed |
| Integrity | trust-worthy | usually trustworthy | | untrust-worthy |
| Sense of responsibility | responsible | usually responsible | sometimes responsible | rarely responsible |
| Relationship with adults | is comfortable | | avoids contact | is dependent |
| Participation in extra-curricular activities | enthusiastic | frequent | occasional | rare |

Comments:

Please mark on the line your response to each category. You may adjust the placement of the check mark to the left or right within a given section to indicate gradations in your evaluation.

| | | | | |
|--|------------------|-------------|-------------|-------------|
| | Excellent | Good | Fair | Poor |
|--|------------------|-------------|-------------|-------------|

| | | | | |
|---|--|--|--|--|
| Self-motivation | | | | |
| Organization of time and work | | | | |
| Intellectual Curiosity | | | | |
| Ability to express ideas orally | | | | |
| Ability to follow directions | | | | |
| Ability to work in a group | | | | |
| Ability to work independently | | | | |
| Perseverance | | | | |
| Academic Promise | | | | |
| Academic Achievement | | | | |
| Attendance | | | | |
| Parent Cooperation | | | | |
| Parent involvement in school affairs | | | | |
| Reads for pleasure: Much Some Little | | | | |

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

Signature

Print or Type Name

**Powhatan School
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*Information contained on this form is strictly confidential.