

TEACHER RECOMMENDATION FORM (Middle School)

Name of Applicant: _____

Applying for Grade: _____ Beginning in the fall/spring of: _____

To the teacher: Your thoughtful evaluation of this student will assist our Admission Committee and help provide information for the best placement for the applicant. The information you provide will be kept in the strictest confidence and will not become part of the student's permanent record, nor will it be shared, directly or indirectly, with the applicant's parents. Please complete **both** sides of this form by _____. *Thank You.*

Teacher's Name _____ Signature _____

Title/Position _____ Date _____

Name/Address of School _____
School Name street city state zip

Email Address _____ Phone Number _____

What course(s) have you taught this applicant and what text(s) were used? _____

How long have you known the applicant? _____

What courses/level do you recommend for this student next year? _____

Compared to other students in the applicant's class, please rate the candidate in the following areas:

ACADEMIC QUALITIES	Top 5%	Excellent	Above Average	Average	Below Average	No Basis for Judgment
Academic achievement						
Academic potential						
Self motivation, effort						
Study habits, organization						
Ability to work in a group						
Attention, concentration						
Willingness to take risks						
Engagement/Participation in class discussion						
Ability to seek help when needed						
Intellectual curiosity						
Leadership skills						
Writing ability						
Reading comprehension						

Personal Qualities	Top 5%	Excellent	Above Average	Average	Below Average	No Basis for Judgment
Self-confidence						
Respect for others						
Sense of humor						
Honesty and integrity						
Emotional stability						

When complete, please forward the recommendation in a sealed envelope to Next Generation School, ATTN: Kristin Sandone, 2521 Galen Drive, Champaign, IL 61821. We would appreciate if you sign your name over the sealed flap of the envelope.

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Please circle all the words that describe this student.

Confident	Anxious	Passive	Well-liked	Curious	Creative	Positive influence
Follower	Honest	Helpful	Irritable	Manipulative	Shy	Perfectionist
Organized	Assertive	Social	Responsible	Distractible	Sensitive	Self-disciplined
Motivated	Over-protected	Articulate	Conscientious	Distracting	Disobedient	Negative influence
Self-centered	Energetic	Easily Discouraged	OTHER:	_____	_____	_____

Please list the applicant's academic strengths and weaknesses (effort, curiosity, motivation, achievement, homework preparation):

Please describe the applicant's character (leadership, honesty, responsibility, concern for others, sense of humor):

Please add any comments you feel would help the committee gain a better understanding of this applicant:

Parental expectations and attitude toward the child:

How would you compare the *academic achievement* of this student to that of other students you have observed?

Superior Good Average Below Average

How would you compare the *personal qualities* of this student to that of other students you have observed?

Superior Good Average Below Average

Are the parents cooperative and involved in the School?

Exceptionally cooperative Generally cooperative Rarely cooperative Rather disinterested

Would you be willing to discuss this applicant by telephone if we have further questions? YES NO

Is there information about this applicant that would be better communicated by telephone? YES NO

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