**School Year 20\_\_\_ - 20\_\_\_**

 **1st – 6th grade**

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade for which entering: \_\_\_\_\_\_\_\_\_\_\_

We would appreciate receiving your answer to the following questions that related to the candidate.

1. Is the candidate in good standing and eligible to re-enter your school, if you offer the next grade level? Yes ( ) No ( )
2. Has any disciplinary action ever been taken on this student? Yes ( ) No ( )
3. Has any disciplinary action involved alcohol or drugs? Yes ( ) No ( )
4. Are parents cooperative? Yes ( ) No ( )
5. If your school is private, are financial responsibilities for school bills met on item? Not applicable ( ) Yes ( ) No ( )
6. How long have you know the applicant? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. How would you compare this student to others whom you have observed in similar circumstances?

|  |  |  |
| --- | --- | --- |
| ***Below average***  | ***Fair***  | ***Good (above average)*** |
| ***Excellent***  | ***Outstanding*** | ***One of the top few I have******encountered in my career*** |

Thank you for your time and effort in evaluating this student and assisting both the applicant and Sebastian Bilingual School. You are welcome to call if you would like to discuss the candidate personally. Your information will remain confidential.

Evaluator’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_\_\_

School Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In what capacity have you known the applicant? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OFFICIAL SCHOOL STAMP**

**School Recommendation Form**

**For Admission to 1st – 6th grade**

Name of Student Grade for which applying \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade for which is applying \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This student is applying for admission to Sebastian Bilingual School for the **20\_\_\_ - 20\_\_\_** school year. This recommendation form provides a way of getting to know the child and is received with the awareness that children are constantly changing and developing. Your candid evaluation of the applicant will be of invaluable assistance to our school admission process.

**Be assured that your comments will be held in strict confidence.** Thank you for your assistance. **If you wish to discuss this student personally also, please check here.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Area** | **Outstanding** | **Above average** | **Average** | **Below average** | **Not applicable** |
| **Personality Traits** |  |  |  |  |  |
| Sense of Humor |  |  |  |  |  |
| Self-confidence |  |  |  |  |  |
| Concern for Others |  |  |  |  |  |
| Standards of Personal Conduct |  |  |  |  |  |
| Reaction to Criticism |  |  |  |  |  |
| Leadership Potential |  |  |  |  |  |
| **Work Habits** |  |  |  |  |  |
| Quality of work |  |  |  |  |  |
| Independent work and study habits/ Organization skills  |  |  |  |  |  |
| Attentiveness |  |  |  |  |  |
| Class Participation |  |  |  |  |  |
| Peer Interactions |  |  |  |  |  |
| Faculty Interactions |  |  |  |  |  |