

Name of Applicant: \_\_\_\_\_ Applying for Grade: \_\_\_\_\_

Name of school completing recommendation: \_\_\_\_\_

**Teacher - Please be sure to download this form to your desktop prior to filling in electronically. Please save after completion and upload to email request. As an alternative, this form may be printed, completed by hand, scanned and uploaded to email request.** This Teacher Recommendation form will be treated confidentially and will not be shared with parents. Thank you for your cooperation and honesty. You may wish to retain the original copy for your files to send to additional schools. The student's application cannot be processed until the form is received in the Admissions Office. Deadlines are determined by individual schools.

**Please place an "x" in the appropriate box below and comment. Thank you.**

Skills Ratings	Exceeds Expectations	Area of Strength	Age Appropriate	Progressing	Area of Concern	Please Comment
Listens to and follows teacher's directions						
Is attentive to group discussions/activities						
Contributes appropriately to group discussions/activities						
Demonstrates ability to work independently						
Perseveres in spite of difficulty						
Works cooperatively						
Enjoys new challenges						
Moves easily from one activity to another						
Demonstrates ability to stay on task						
Ability to complete work in a timely manner						
Ability to express ideas verbally						
Clarity of writing						
Grammar/Mechanics skills						
Reading rate and fluency						
Reading comprehension						
Knowledge and usage of vocabulary						
Imagination and creativity						
Problem-solving skills						
Willingness to take risks						
Reads for pleasure						
Number's sense						
Spatial sense						
Academic curiosity						

Social Skills	Consistently	Sometimes	Seldom	Please Comment
Responds positively to constructive criticism				
Establishes friendships easily				
Is comfortable in a group				
Respectful of property (personal and others)				
Accepts responsibility for actions				
Demonstrates self-control				
Takes responsibility for belongings				
Is cooperative				
Demonstrates appropriate energy level				
Exhibits emotional maturity				
Takes pride in appearance				

**Circle the words that best describe this applicant:**

- |            |                    |                 |                  |              |
|------------|--------------------|-----------------|------------------|--------------|
| Aggressive | Disobedient        | Honest          | Oppositional     | Shy          |
| Anxious    | Easily discouraged | Immature        | Over-protected   | Self-reliant |
| Cheerful   | Flexible           | Impulsive       | Perfectionist    | Spirited     |
| Confident  | Follower           | Manipulative    | Positive leader  | Well-liked   |
| Curious    | Helpful            | Negative Leader | Self-disciplined | Witty        |

**H AIS Common Teacher Recommendation  
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Please describe the student's academic/social strengths, assets and gifts: \_\_\_\_\_  
\_\_\_\_\_

Please describe the student's academic/social challenge and areas of support: \_\_\_\_\_  
\_\_\_\_\_

Please add any additional information that would provide a more complete picture of the student and family:  
\_\_\_\_\_  
\_\_\_\_\_

**This applicant is:**  
 Strongly Recommended       Recommended       Recommended with Reservation       Not Recommended

I would:     like to       be willing to discuss this applicant by telephone.

**Teacher Verification:** The electronic signature below and its related fields are treated like a handwritten signature. By completing the form, I certify that the information provided is honestly presented.

Teacher Signature:	Date:
Teacher Name:	Course Name:
Teacher Email:	School Name:
Teacher Phone:	School Phone:

Submit to: [admission@kinkaid.org](mailto:admission@kinkaid.org)