



A K-8 INDEPENDENT SCHOOL

Inspiring Compassionate Leaders Through Academic Excellence

**Core Academic Teacher Recommendation for Students Entering Grades 1-5**

Student's Full Name (please print): \_\_\_\_\_

Applying to enter (please circle):    Grade 1            Grade 2            Grade 3            Grade 4            Grade 5

**To the parent/guardian:** Please sign the release form below and give this form to your child's teacher with a stamped envelope addressed to The Healdsburg School, Office of Admission, 33-H Healdsburg Avenue, Healdsburg CA, 95448. Please have your child's teacher fill out the form after December of the current academic year.

**For the student named above, I acknowledge that I waive my right to read this confidential teacher recommendation.**

Name of parent/guardian (please print) \_\_\_\_\_

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

**To the teacher:** This student is a candidate for admission to The Healdsburg School, an independent private school for grades K – 8. Your thoughtful and candid evaluation of the applicant will be of great assistance to our Admission Office and is truly appreciated. **Your assessment will be held in confidence, as noted above.** Please mail this form directly to The Healdsburg School in the envelope that the family has provided. If you have any questions, please contact The Healdsburg School Admission Office at 707.433.4847.

Name of the teacher completing this form (please print) \_\_\_\_\_ Date \_\_\_\_\_

School Name & Address \_\_\_\_\_

City, State, Zip code \_\_\_\_\_

Email address \_\_\_\_\_

General Overview

1. Please describe this student's special characteristics and talents.

2. Please elaborate on this student's performance as compared with his/her potential.
  
  
  
  
  
  
  
  
  
  
3. Which three words best describe this student?
  
  
  
  
  
  
  
  
  
  
4. Please share with us any thoughts you have regarding the student's family, expectations for their child, their cooperation with you, and their contribution to the school community.

Reading and Comprehension

1. Please comment on the student's reading level and comprehension.

Written Language

1. Please comment on this student's writing.

Math

1. Please comment on the student's math knowledge and skills.

Please assess the student's level of development in the following areas:

<u>Academic/Personal Characteristics</u>	<u>Superior</u>	<u>Age Appropriate</u>	<u>Still Developing</u>	<u>Comments</u>
Level of maturity				
Critical thinking				
Intellectual curiosity				
Honesty and integrity				
Organizational skills				
Academic motivation				
Academic achievement				
Academic potential				
Ability to follow directions				
Completion of tasks				
Listening skills				
Reading skills				
Writing skills				
Math skills				
Participation in class discussions				
Ability to make transitions				
Kindness to others				
Ability to use constructive criticism				
Responsibility for work				
Respect for differences in others				
Reaction to setbacks				
Relationships with peers				
Rapport with adults				
Ability to develop friendships				
Ability to resolve conflicts				
Willingness to accept a challenge				
Leadership qualities				
Creativity				
Ability to work independently				
Ability to work cooperatively				

How would you recommend this student? (please circle)

With great enthusiasm      With confidence      With some confidence      Reluctantly      I do not recommend

1. Are absences or late arrivals an issue for this student?

2. Has this student been recommended for special support services and/or tutoring support?      Yes/No  
 Is this student currently receiving any special support services and/or tutoring support?      Yes/No  
*If yes, please explain.*

3. Have there been any disciplinary, emotional or other concerns regarding this student?      Yes/No  
*If yes, please explain.*

- We welcome any additional information you think would be helpful regarding this student.
  
- Do you have information about this student that can be better conveyed in a phone call? Yes / No  
If yes, please indicate the phone number and best time for the Director of Admission to contact you.

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Signature

Date

Best Contact Number

*Many thanks for your assistance in providing us with this information.*