



95 HIGH STREET LESTONE, MAINE 04750 207.325.3619

admissions@mssm.org www.mssm.org

RECOMMENDATION FORM-Science Instructor

APPLICANT TO COMPLETE THIS SECTION:

Applicant's Name: _____

OPTIONAL WAIVER OF RIGHT OF ACCESS

We, the undersigned, understand that the information provided in this letter of recommendation will be used by MSSM in deciding admission. We hereby waive any and all rights of access to this letter we might have under the Family Educational Rights and Privacy Act of 1974, or other related laws, regulations, or policies.

_____/_____
Applicant Signature / Date Parent/Legal Guardian Signature / Date

The above-named applicant has applied for admission to the Maine School of Science and Mathematics. We would like you to know that this is an important element of the application process and ask that you be detailed and candid in your comments. Your time and effort is greatly appreciated. We ask that you return this form directly to the Admission Office. Thank you for your time and candor.

On separate paper, please respond to the following:

- A) Describe a memorable moment in your classroom which demonstrated this applicant's knowledge, understanding and/or proficiency in science.
- B) Have you noticed any demonstration of the applicant working or sharing scientific ideas/concepts with other students?
- C) Has this applicant participated in any extra-curricular activities related to science (e.g. Science Fair, Envirothon, Science Olympiad)?
- D) In your opinion, does this applicant possess the skills necessary for success at the Maine School of Science and Mathematics?

Name (please print): _____ Current Course Name: _____

Signature: _____ Date: _____ Email: _____

Address: _____ Phone Number: _____

How long have you known the applicant? _____

The student has completed and/or is taking the following science course(s): Earth Science Biology Chemistry

Physics Other _____

