

CURRENT TEACHER RECOMMENDATION



CHOATE
ROSEMARY HALL

SUMMER PROGRAMS 2020 APPLICATION FOR ON CAMPUS PROGRAMS AND STUDY ABROAD

Dear Teacher: Thank you for taking your valuable time to complete this evaluation. Your reflections are an important part of our admission process. Letters of recommendation, including comments and information provided by the applicant's teachers, principals, and acquaintances, are held in confidence by Choate Rosemary Hall and will not be disclosed or shared to any third parties, including the applicant and/or the applicant's family. Please complete this form and return it directly to the Choate Summer Programs Office via mail, fax, or email. Please print or type.

STUDENT INFORMATION

Student's First Name: _____ Student's Preferred First Name: _____

Student's Last Name: _____

Current School: _____

Current U.S. Equivalent Grade Level: 6th 7th 8th 9th 10th 11th

What program at Choate Rosemary Hall is this student applying for: _____

STUDENT EVALUATION

Choate Rosemary Hall offers a challenging program which attracts strong students who have demonstrated the ability to work hard and flourish. Your candid evaluation of this applicant's attitude and promise of success in a demanding course of study, as well as his or her ability and willingness to contribute to the life of the community (or to the cohesiveness of the Study Abroad group, if applicable), is greatly appreciated. Thank you.

The student is in what type of academic program? (check one)

Honors Advanced Standard Level Classes are not sectioned

Primary language of instruction in your class: _____

If the student's first language is **not** English, please check one in each of the following:

Written English: Excellent Good Fair Poor

Spoken English: Excellent Good Fair Poor

Please share with us the title of your course and provide a brief description of course content. It is especially helpful to know the specific subject area and what texts are used. _____

If the student is relatively strong or weak in any area of your course curriculum, please elaborate. _____

If there are any issues regarding the student's attendance, tardiness, etc., please elaborate. _____

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group.

	One of the top few I have ever worked with	Excellent (top 10% this year)	Good (Above Average)	Average	Below Average	No Basis for Judgment
Academic Achievement						
Intellectual curiosity						
Honesty/Integrity						
Commitment to excellence						
Maturity (relative to age)						
Concern for others						
Creativity						
Independence						
Ability to adjust						
Emotional stability						
Responsibility						
Effort/Determination						
Overall evaluation as a student						
Overall evaluation as a person						

What are the first three words that come to mind to describe this student? _____

Please comment on the student's character, citizenship, and contributions to the community. _____

How long have you known the student; in what relationship? _____

Would we be able to make a more informed decision by speaking with you personally? Yes No

Type of school: Public Parochial Private

School Name: _____

School Mailing Address: _____

School Phone: () _____ School Fax: () _____

Prefix: Miss Ms. Mrs. Mr. Dr.

Teacher's First Name: _____ Teacher's Last Name: _____

Teacher's School Email: _____

Subject taught: English Math Science Language History Arts

I understand that by signing below, I acknowledge and warrant the truthfulness of the information provided in this form.

Signature: _____ Date: _____

Please return the completed form **directly** to the Choate Summer Programs Office via mail, fax, or email. **Thank you!**

Choate Rosemary Hall Summer Programs - 333 Christian Street, Wallingford, CT 06492

Fax: (203) 697-2519 • Email: choatesummer@choate.edu