



TEACHER RECOMMENDATION FORM

CONFIDENTIAL

Date: _____

Student's Name: _____ Grade: _____

School: _____ Address: _____

Teacher filling out this form: _____ Phone: _____

What subjects have you taught this student? _____

Have you known the student in any capacity outside the classroom? Yes No If yes, please describe:

How long have you known this student? _____

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

Academic Qualities

	Excellent	Good	Average	Fair	Poor	Comments
Self-Motivation						
Organization of Time & Work						
Intellectual Curiosity						
Attention Span						
Ability to Express Ideas Orally						
Ability to Work in a Group						
Ability to Work Independently						
Ability to Follow Directions						
Perseverance						
Sense of Responsibility						

Personal Qualities

	Excellent	Good	Average	Fair	Poor	Comments
Consideration for Others						
Peer Relationships						
Leadership Skills						
Emotional Maturity						
Self-Confidence						
Sense of Humor						
Self-Control						
Relationships with Adults						
Honesty/Integrity						

In what subject area, if any, does this student show particular strength?

In what subject areas, if any, has this student needed special support or help?

Has this student displayed any notable interest or talents?

Please comment on this student's creativity.

Are there any concerns about attendance or promptness?

Please characterize the parent/ parents' cooperation and involvement?

Is there any other information about this student or the family that would be helpful for us to know?

I recommend this student:	Enthusiastically	With Confidence	Mildly	With Reservation	Not at All
Academic Ability and Promise					
Character and Personal Promise					
Overall					

Check if you would like Warren-Walker School to call you to discuss your recommendation further.

Signature _____ Date _____

These comments will be very helpful to us in deciding if our school program will be able to meet this student's needs; we thank you for taking the time to aid us in understanding the candidate better.

All information, written and verbal, is considered confidential and will not be shared with the applicant or family.

Questions should be directed to the Director of Admission at 619-223-3663.

Please mail or fax the form to:

Admission Office
Warren-Walker School
4605 Point Loma Avenue
San Diego, CA 92107
Fax: 619-223-5567