

CAPE FEAR ACADEMY  
ELEMENTARY YEARS TEACHER RECOMMENDATION

Applicant Name \_\_\_\_\_ Grade applying for \_\_\_\_\_

Please answer the following questions based on your personal observation and experience.

**Thank you for returning this as soon as possible. All information on this recommendation is confidential.**

How long have you known this student and in what capacity? \_\_\_\_\_

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<b>Does the student:</b>	<b>Never</b>	<b>Sometimes</b>	<b>Usually</b>	<b>Always</b>
Show eagerness to learn	1	2	3	4
Interact easily with others	1	2	3	4
Follow directions given in a group	1	2	3	4
Follow directions given individually	1	2	3	4
Show self-confidence	1	2	3	4
Exhibit self-control	1	2	3	4
Display age-appropriate maturity	1	2	3	4
Listen attentively for appropriate time	1	2	3	4
Performs at developmental/grade level academic standards	1	2	3	4

Please elaborate as needed on any 1s or 2s above. \_\_\_\_\_

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Please identify a social, emotional, behavioral, or academic area of strength for this student.

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What special interests or affinities does this student display? \_\_\_\_\_

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In what area(s) might we set goals to help this child be successful in school?

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To your knowledge, has this child ever been evaluated by an outside source for learning difficulties or emotional problems? Yes \_\_\_\_\_ No \_\_\_\_\_ Do not know \_\_\_\_\_

If YES, please explain and give dates if available. \_\_\_\_\_

Realizing that Cape Fear Academy offers a challenging academic curriculum, do you recommend this candidate? (Check one please):

Enthusiastically \_\_\_\_\_ With reasonable confidence \_\_\_\_\_ With reservations \_\_\_\_\_ Do not recommend \_\_\_\_\_

Please explain as needed. \_\_\_\_\_

In relation to students of the same age you have known, please indicate your rating below:

(Check one in each row please.)

	Outstanding	Excellent	Good	Fair	Poor
As a student:	_____	_____	_____	_____	_____
As a classroom citizen:	_____	_____	_____	_____	_____

Additional Remarks:

Teacher Name: \_\_\_\_\_ Date: \_\_\_\_\_

Job Title: \_\_\_\_\_

School Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

School address: \_\_\_\_\_

Email: \_\_\_\_\_

**Thank you** for sharing your insights and observations.

Please return via email directly to:  
laura.peterson@capefearacademy.org