



Name of Student: _____ Candidate for Grade: _____

Parent or Guardian

Please write your child's name in the space above, then read and sign the following before giving this to your child's teacher. I understand and agree that the information contained on this Teacher Recommendation form is confidential and will be used only in the selection of candidates and will not become part of the candidate's permanent file. I also agree that this completed form will not be available to candidates, parents, or anyone outside of the Admissions Committee, and I waive any right that I may have to see it.

Signature of Parent of Guardian

Date

Teacher

Please complete this entire form and return it via U.S. mail, fax and/or email. As a current teacher, please evaluate the candidate based on your direct knowledge of him/her. Your comments will be held in strict confidence. Please check the appropriate boxes and include comments.

General Academic Ability

Superior

High Average

Average

Below Average

Academic Skills

	Consistently	Usually	Seldom	Not Observed
Listens to and follows teacher's directions				
Is attentive during group discussions/activities				
Contributes appropriately to group discussions/activities				
Demonstrates ability to work independently				
Perseveres in spite of difficulty				
Works cooperatively				
Enjoys new challenges				
Demonstrates good visual perception				
Demonstrates good auditory memory				
Exhibits problem solving abilities				
Expresses ideas clearly				
Moves easily from one activity to another				
Demonstrates appropriate energy level				
Demonstrates ability to stay on task				
Is self-motivated				

Social Skills

	Consistently	Usually	Seldom	Not Observed
Responds positively to constructive criticism				
Establishes friendships easily				
Is comfortable in a group				
Is considerate of others				
Demonstrates self-control				
Communicates needs effectively				
Takes responsibility for belongings				
Is cooperative				
Demonstrates appropriate behavior				
Exhibits emotional maturity				

Physical Development

	Excellent	Good	Needs Improvement
Gross motor coordination			
Speech/articulation			
Fine motor coordination			
General health			

Circle the words that best describe this applicant:

Aggressive	Disobedient	Irritable	Organized	Self-disciplined
Anxious	Easily Discouraged	Manipulative	Over-protected	Shy
Articulate	Follower	Motivated	Perfectionist	Social
Cheerful	Helpful	Mature	Positive Leader	Vivacious
Confident	Honest	Negative Leader	Responsible	Well-liked
Conscientious	Immature	Oppositional	Self-centered	

Is student habitually tardy or absent? Yes No

If yes, please elaborate: _____

This student works best in a (check all that apply):

- Highly challenging academic environment
 Developmentally appropriate environment
 Highly structured environment

How would you rate this student as a citizen? Excellent Very Good Average Fair Poor

How would you rate this student as a scholar? Excellent Very Good Average Fair Poor

To your knowledge, is the parent's perception of the child consistent with the school's understanding of the child?

Please share with us anything about the applicant you think we should consider as we review his/her application.

	Consistently	Usually	Seldom	Not Observed
Parent(s) participates in school activities				
Parent(s) supports school policies and procedures				

Signature of teacher: _____ Date: _____

Printed name: _____ Phone: _____

School name: _____ E-mail: _____

Please return to:

Berchmans Academy
 Admissions Office
 P O Box 310
 Grand Coteau, Louisiana 70541
 Phone: 337.662.7064
 Fax: 337.662.3011
 Email: admissions@sshcoteau.org