



## ATHLETICS RECOMMENDATION FORM (OPTIONAL)

FOR APPLICANTS TO MIDDLE AND UPPER SCHOOLS

*(Note: This form is not required, but applicants to Grades Six through Twelve may ask someone familiar with their athletic abilities to submit this on their behalf if they wish.)*

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### INSTRUCTIONS TO PARENTS:

Dear Parent, this optional form may be filed to supplement your child's application. Complete the information requested in the spaces below and give this form to your child's coach after December 1. This form is confidential and must be sent by the coach to Viewpoint School.

Please read the following statement and sign this form. *I acknowledge that I waive my right to read this confidential recommendation.*

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Name

\_\_\_\_\_  
Applying to Grade

\_\_\_\_\_  
Name of Arts Instructor

\_\_\_\_\_  
Title

\_\_\_\_\_  
School or Organization Name, Address

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### INSTRUCTIONS TO ATHLETIC PERSONNEL:

Viewpoint School is a coeducational, college preparatory day school for students in TK through Grade Twelve. The School provides an academically enriched, nurturing environment, and promotes the intellectual, emotional, physical, and social growth of children. The Admission Committee seeks to enroll students who will find success in the academic program, who will participate in the School's community, who possess a high level of motivation, who are of good character, and who demonstrate positive behavior. Your completion of both sides of this evaluation is extremely helpful. It is important to all of us that this child's next school placement be an appropriate one for both the student and the family. Your observations of this child are important to us. Please know that the professional comments you share are held in **STRICTEST CONFIDENCE**, and do not become a part of a student's permanent record. We thank you in advance for the help your comments will provide.

Please tell us a bit about yourself and your background, as well as how long, in what capacity, and in what sport you have worked with the applicant.

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In the space below, please provide a brief statement about this student-athlete's participation in sports. Please list any notable achievements (Most Valuable Player, All-League, etc.) If you need additional space, please attach a separate letter.

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APPLICANT'S NAME: \_\_\_\_\_

I would evaluate this candidate's athletic abilities as follows:

	Poor	Fair	Good	Outstanding
-Endurance				
-Power/Strength				
-Skill/Technique				
-Quickness/Speed				
-Attitude				
-Commitment				
-Confidence				
-Leadership				
-Demeanor				
-Coachability				
-Motivation				
-Sportsmanship				
-Teamwork				

Additional Comments: \_\_\_\_\_  
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**Check here if you would like us to call you for further information about this applicant.**

Best time to reach you: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_  
Please Print Your Name and Title Signature Date

Your E-mail address: \_\_\_\_\_

Please return this form no later than January 12, 2024 directly to:  
Viewpoint School Office of Admission  
Attn: Admission Coordinator  
23620 Mulholland Highway • Calabasas, CA 91302-2097  
818-591-6560 • Fax 818-591-0834 • email: [patrick.labo@viewpoint.org](mailto:patrick.labo@viewpoint.org)