



Oneida-Herkimer-Madison BOCES

P.O. Box 70 • 4747 Middle Settlement Road • New Hartford, NY 13413-0070
www.oneida-boces.org

Applicant name: _____

New Visions Academic Teacher Recommendation

Please rate the New Visions applicant in the following areas, from one (lowest) to five (highest). Keep in mind that the students will be compared with other capable college preparatory students, and if accepted into the program, will be working with a variety of individuals in a professional environment.

	No Basis to Judge	1	2	3	4	5
Ability to get along with others						
Ability to work in a group						
Ability to work independently						
Academic ability						
Ability to meet assignment deadlines						
Dependability						
Ease with adults						
Flexibility						
Maturity						
Self-motivation						
Verbal skills						

Please provide a narrative with supporting or clarifying information for any or all of the above areas. Feel free to add any additional material you feel would be helpful in evaluating this applicant.

Academic Teacher Name (printed): _____ Course: _____

Teacher Signature: _____ Date: _____

Teacher Email: _____ Teacher Phone #: _____

- Please return this completed form to the student’s school counselor before Friday, March 27, 2026.