



Teacher Recommendation for Students Applying for 1st - 8th Grade

The student listed below has applied for admission to St. Joseph School. We would appreciate your thoughtful evaluation of the student in the areas listed below. Thank you for taking the time to complete this recommendation. Please return it by mail, in a sealed envelope, to St. Joseph School. *The information submitted will be considered confidential, will not become part of the student's school records, and is not shared outside of the St. Joseph School Admission team.*

Student Name _____

Person Completing Recommendation _____

Title _____ Grade Level _____

School _____ Phone _____

Mailing Address _____

How long have you known the applicant and in what capacity? _____

In relation to other students you have taught at this grade level, how would you rate this student in terms of:

	Outstanding	Above Average	Average	Below Average	Comments
Reading skills					
Math skills					
Handwriting					
Gross motor skills/body movement					
Motivation/effort					
Curiosity/creativity					
Self Confidence/leadership					
Courtesy/cooperation					
Respect for other children					
Respect for teacher					
Homework responsibility					
Attendance and punctuality					
Works well in a group					
Can work independently					
Overall conduct					
Parental support and involvement					

What words come to mind to describe the applicant?

What are this applicant's strengths as a student?

What observations do you have regarding this applicant's learning style?

Please use this space to add any additional comments about this child. Does this student receive any special assistance in areas such as speech, learning disabilities, etc.?

If you would like to discuss this child more fully, please call Jackie Olund, Vice - Principal, at (425) 313-9129, ext 324

If we need further information, may we call you? Yes No

Phone Number _____ Best time to call _____

Signature of Evaluator

Date

**Please return this form by mail
in a sealed envelope to:**

**St. Joseph School
220 Mountain Park Blvd. SW
Issaquah, WA 98027**

**Tel: (425) 313-9129
Fax: (425) 313-7296**