

SCHOOL of the SEVEN SAGES

Letter of Recommendation

SECTION I. TO BE COMPLETED BY A PARENT

Student's Name:				Date of Birth/			
	(First)	(Middle)	(Last)		mo / day / year		
I hereby authorize th	e release of thi	s information to Scl	nool of the Seven Sages:	Yes No			
I authorize School of	the Seven Sago	es to contact the refe	erences below for informa	ation about my c	child: Yes No		
Date:	Signatu	ıre of Parent or Gı	ıardian:				
SECTION II. TO	BE COMPL	ETEDBY A PR	EVIOUS TEACHE	R/ADMINIS	TRATOR		
Name:			Pc	osition:			
Name of school:							
A 11							
Address:							
	(Street/PO	Box)	(City)	(Stat	e) (Zip)		
Telephone: ()						
Principal's Name:							
In what capacity ar	nd for how lo	ng have you knov	vn the applicant?				



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Please indicate your ratings by numbers in the right-hand column. Use a question mark where you have insufficient evidence. Your candid estimate of the applicant will be of invaluable assistance to the admissions process at School of the Seven Sages. Your comments will be held in strict confidence.

Confidential Administrator/Teacher Recommendation

	1	2	3	4	5	Ratings
Academic	Exceptionally	Generally Strong	Average Student,	Below Average:	Questionable	
Potential	Promising Student	Student	Capable of	□ Marginal Ability	Candidate	
			Satisfactory Work	□ Lacks Motivation		
Personal	Outstanding –			Below Average,	Very Immature	
Qualities	Leads and	Generally Strong	Average	Immature	for Age	
	Participates					
Emotional	Exceptionally		Generally Well	□ Excitable	□ Hyper-emotional	
Stability	Stable	Well Balanced	Balanced	□ Unresponsive	□ Apathetic	
				□ Distractible		
Summary	OUTSTANDING	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	POOR	



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1.	To your knowledge, has the applicant had any history of involvement with drugs, alcohol, or juvenile						
	delinquency? ☐ Yes ☐ No If yes, please explain:						
2.	Has the applicant ever been suspended or expelled? ☐ Yes ☐ No ☐ If yes, please explain:						
3.	To your knowledge, does the applicant have <u>any</u> history of behavior problems?						
5.	Does the candidate have any history of learning disability or has he/she required any special help to me academic requirements? ☐ Yes ☐ No ☐ If yes, please explain:						
6.	Have you found the child's parents to be cooperative, involved, and supportive in the child's education?						
Te	eacher's Signature Date:						