

# GRADES 2-9 TEACHER RECOMMENDATION FORM

Student's Name: \_\_\_\_\_

Subject: \_\_\_\_\_  
(e.g., Math, English, etc.)

The student named above is a candidate for admission to Greensboro Montessori School. We would appreciate your candid evaluation of this student in the below areas. The student's parent(s)/legal guardian(s) are aware that we've requested an evaluation of their child and that your comments will be held confidential. Please complete and return this Information Form to the Admission Office by the date above. Thank you for your time and effort.

Explanation of Continuum  
**S** = Superior   **E** = Excellent   **G** = Good   **F** = Fair   **P** = Poor

1. Please rate this applicant on the following characteristics, if applicable:

WORK HABITS AND ABILITIES	S	E	G	F	P
Follows directions					
Uses time wisely					
Accepts and completes independent work					
Attends school regularly					
Completes classwork in reasonable amount of time					
Completes homework assignments					
Uses classroom materials responsibly					
Listens attentively					
Follows established classroom procedures					
Is enthusiastic about learning					
Shows organization and planning					
Recalls accurately					
Accepts and follows through on suggestions for improvement					
Understands concepts and materials					
SOCIAL DEVELOPMENT	S	E	G	F	P
Works well in group activities					
Gets along well with peers					
Respects the rights of others					
Is honest					
Enters new activities enthusiastically					
Solves problems without verbal or physical aggressiveness					
Is cooperative with classmates and teachers					
Is dependable					
Shows leadership qualities					
Takes part in class discussions					
Interacts well with peers in structured activities					
PHYSICAL DEVELOPMENT	S	E	G	F	P
Has normal gross motor control					
Has normal fine motor control					
Has visual perception appropriate for age					
Participates in active play, sports, or games					
EMOTIONAL DEVELOPMENT	S	E	G	F	P
Has a positive self-image					
Speaks or behaves with minimal impulsivity					
Accepts responsibility for own actions and mistakes					
Is secure and self-confident					
Self-monitors behavior					
Uses classroom materials responsibly					

2. Please describe this student's:

Personality, interests, and motivation:

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Academic aptitude in relation to achievement:

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The degree of parental involvement in this student's education:

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Current instructional level: Reading: \_\_\_\_\_

Mathematics: \_\_\_\_\_

3. What are this student's:

Strengths :

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Weaknesses:

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Special Needs:

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4. To your knowledge, has this student received any resources help, evaluations, or special services for either enrichment or remedial purposes?

Yes     No

If yes, please describe:

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5. I recommend this candidate:     Enthusiastically     Confidently     With reservation     Do not recommend

Additional remarks:

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Name of teacher completing this form:

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Name of school:

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Name of Class or Grade Level: \_\_\_\_\_

School address:

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Teacher's signature: \_\_\_\_\_

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Date completed: \_\_\_\_\_

School Phone: \_\_\_\_\_