

SAINT MARY SCHOOL

183 High Ridge Avenue
Ridgefield, CT 06877
203-438-7288
FAX 203-431-8742

CONFIDENTIAL TEACHER RECOMMENDATION FOR GRADE _____ SCHOOL YEAR _____

To be completed for all new students entering Saint Mary School, grades 1-8.

Teacher Instructions: Thank you for taking the time to complete this recommendation. All information will be considered confidential. The insight that you are able to provide helps us in our application process; specific examples are especially useful. Please return this form as soon as possible to the address above.

APPLICANT NAME _____ SCHOOL YEAR _____

Please indicate your assessment of the above named student.
Ratings should be indicated as: **SUPERIOR, GOOD, AVERAGE, BELOW AVERAGE, or POOR.**

SOCIAL/EMOTIONAL DEVELOPMENT

Emotional Maturity..... _____

Ability to follow directions..... _____

Ability to work independently..... _____

Ability to work in a group..... _____

Listening skills in a group..... _____

Ability to resolve conflicts appropriately..... _____

Attitude toward teachers..... _____

Attitude toward peers..... _____

Attitude of peers toward child..... _____

Child's initial adjustment to class..... _____

Child's current adjustment to class..... _____

COMMUNICATION/COGNITIVE DEVELOPMENT

Fluency in English..... _____

Clarity of speech..... _____

Vocabulary..... _____

Conversational skills..... _____

Contributes to group discussions..... _____

Mathematical concepts..... _____

Science concepts..... _____

AESTHETIC DEVELOPMENT (FOR FIRST GRADE ONLY)

Small motor coordination (i.e. cutting, drawing, handling manipulatives) ... _____

Large motor coordination (i.e. running, skipping, climbing, balance, throwing/catching)..... _____

Health..... _____

Please comment on the following (for all students):

1. Has outside professional assessment or support been recommended and/or given? If yes, please elaborate.
2. Attendance and tardiness:
3. Family expectations and/or attitude of child:
4. Family expectations and involvement in school:
5. Child's developmental strengths:
6. Child's developmental needs or area of concern:
7. Is English the primary language? If not, then what is the primary language spoken?
8. Please indicate any other pertinent information.

This student has been enrolled in this school for ____ year(s). I have known the child for ____ years.

Signature _____ Date _____

Title/Position _____

School _____

Address _____

City/State _____ Telephone _____