



# Teacher Recommendation Form Grades 2-6

## TO BE COMPLETED BY THE PARENT

Please complete the top portion of this form. Give the form to your child's current teacher along with a stamped envelope addressed to:

The Cambridge School, Attn: Admission Office, 12855 Black Mountain Road, San Diego, CA 92129

Applicant's Name: \_\_\_\_\_ Applying for Grade: \_\_\_\_\_

### Please read and sign the statement below:

*I acknowledge that I waive my right to read the confidential teacher recommendations and the school report.*

Name of Applicant's Father/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature of Applicant's Father/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Applicant's Mother/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature of Applicant's Mother/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

## TO BE COMPLETED BY THE TEACHER

*The Cambridge School is a classical school with an accelerated academic pace and an emphasis on faith and character. With this in mind, please complete the following pages of this form. Feel free to photocopy your completed form and send it directly to the school. This recommendation will remain confidential and will not become part of the student's permanent academic record; please be sure the parent has signed above. We sincerely appreciate your cooperation and candor in assessing the student named above.*

Name of Teacher: \_\_\_\_\_ School: \_\_\_\_\_

Signature of Teacher: \_\_\_\_\_ Date: \_\_\_\_\_

Specific Job Title: \_\_\_\_\_

I have known this student for the following length of time (preferably at least 1 year): \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

PLEASE CHECK THE APPROPRIATE DESCRIPTOR:

Social/Emotional	Exceptional	Very Good	Average	Below Average	Not Applicable
Emotional Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention Span	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to Obey/Follow Directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to Correction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude Towards Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude of Peers Toward Student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude Towards Authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work Independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work in Groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to Ask for Help	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Academic/Intellectual	Exceptional	Very Good	Average	Below Average	Not Applicable
Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity and Imagination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Math Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grammar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vocabulary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spelling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PLEASE CHECK THE BEST DESCRIPTOR IN EACH CATEGORY:

Integrity	<input type="checkbox"/> Very Trustworthy <input type="checkbox"/> Untrustworthy	<input type="checkbox"/> Usually Trustworthy <input type="checkbox"/> No Basis for Judgment	<input type="checkbox"/> Occasionally Trustworthy
Social Adjustments with Peers	<input type="checkbox"/> Healthy Relationships <input type="checkbox"/> Frequent Minor Problems	<input type="checkbox"/> Occasional Minor Problems <input type="checkbox"/> Relates Poorly	<input type="checkbox"/> No Basis for Judgment
Sense of Humor	<input type="checkbox"/> Delightful <input type="checkbox"/> Humorless	<input type="checkbox"/> Good <input type="checkbox"/> No Basis for Judgment	<input type="checkbox"/> Inappropriate
Self-Confidence	<input type="checkbox"/> Healthy Self-Image <input type="checkbox"/> Much Reassurance Needed	<input type="checkbox"/> Some Support Needed <input type="checkbox"/> No Basis for Judgment	<input type="checkbox"/> Appears Overly Confident
Consideration of Others	<input type="checkbox"/> Usually Thoughtful <input type="checkbox"/> Selfish	<input type="checkbox"/> Usually Considerate <input type="checkbox"/> No Basis for Judgment	<input type="checkbox"/> Rarely Considerate

**PLEASE CHECK THE BEST DESCRIPTOR IN EACH CATEGORY:**

Maturity	<input type="checkbox"/> Very Mature	<input type="checkbox"/> Appropriate	<input type="checkbox"/> Somewhat Immature
	<input type="checkbox"/> Very Immature	<input type="checkbox"/> No Basis for Judgment	
Attitude of Parents	<input type="checkbox"/> Cooperative	<input type="checkbox"/> Uninvolved	<input type="checkbox"/> Overly Protective
	<input type="checkbox"/> Antagonistic	<input type="checkbox"/> No Basis for Judgment	

**DESCRIBE THE STUDENT. CHECK AS MANY AS APPLY:**

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Anxious       | <input type="checkbox"/> Easily Discouraged | <input type="checkbox"/> Motivated          | <input type="checkbox"/> Self-Centered    |
| <input type="checkbox"/> Articulate    | <input type="checkbox"/> Easily Led         | <input type="checkbox"/> Negative Leader    | <input type="checkbox"/> Self-Disciplined |
| <input type="checkbox"/> Assertive     | <input type="checkbox"/> Hard Working       | <input type="checkbox"/> Overly-Protected   | <input type="checkbox"/> Shy              |
| <input type="checkbox"/> Bully         | <input type="checkbox"/> Honest             | <input type="checkbox"/> Outgoing           | <input type="checkbox"/> Well-Liked       |
| <input type="checkbox"/> Caring        | <input type="checkbox"/> Impulsive          | <input type="checkbox"/> Passive Aggressive | <input type="checkbox"/> Well-Rounded     |
| <input type="checkbox"/> Cheerful      | <input type="checkbox"/> Inarticulate       | <input type="checkbox"/> Perfectionist      |   |
| <input type="checkbox"/> Conscientious | <input type="checkbox"/> Irritable          | <input type="checkbox"/> Positive Leader    |   |
| <input type="checkbox"/> Disobedient   | <input type="checkbox"/> Manipulative       | <input type="checkbox"/> Responsible        |   |

How would you describe the frequency with which you have behavioral issues with this student (never, rarely, on occasion, frequently)? Please explain.

---

---

---

---

---

Does this student receive or need any special accommodations in the classroom?

---

---

---

---

---

Please provide any other information which you feel will be useful in our assessment of this student.

---

---

---

---

---

**Please indicate your level of recommendation regarding this student's admission to an academically rigorous and spiritually robust school:**

- Enthusiastically     Strongly     Fairly Strongly     With Reservation     Do Not Recommend

---

---

*Your assistance in completing this assessment form is greatly appreciated!*