



Recommendation Form
1st – 8th Grade

Name of Student \_\_\_\_\_ has applied for grade \_\_\_\_\_

I/We understand that we may not look at this evaluation and assure the evaluator and the school that we will not try to do so. We give permission for the evaluator to release the information on this form to the schools to which we are applying for admission. We understand that as parents we will not have access to this confidential information and that it will not become part of our child's permanent record.

First Parent/Guardian Signature \_\_\_\_\_

Second Parent/Guardian Signature \_\_\_\_\_

To the Evaluator: Please complete both sides of this form and send to all requesting schools. Your comments will be held in strictest confidence. Thank you very much for your cooperation and assistance.

How long have you known the candidate and in what connection? \_\_\_\_\_

Please list subject taught, including level of difficulty \_\_\_\_\_

Please list the textbook(s) used, if applicable \_\_\_\_\_

Table with 5 columns: Skill Category, Exceeds age expectations, Age appropriate, Needs development, No basis for judgment. Rows include Attention skills, Original thinking, Self-motivation, Ability to work independently, Follows directions, Seeks help when needed, Works well cooperatively, Study habits, Willingness to take risks, Participation in class discussion, Fine motor development, LISTENING (receptive language skills), READING (decoding, comprehension, for pleasure), WRITING (mechanics, spelling, organization of ideas, creativity and imagination), SPEAKING (fluency, clarity of expression), MATH (sense of number, computation, problem-solving, spatial sense).

Please comment on each of the following regarding this child

Academic strengths and weaknesses: effort, curiosity, motivation, achievement in relation to potential, class participation and homework preparation

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Learning style: auditory processing, visual processing, memory, application of learned skills, distractibility, working pace \_\_\_\_\_

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Social skills: cooperation with peers, interaction with adults, respect for others, awareness of social cues \_\_\_\_\_

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Emotional maturity: self-confidence, respect for limits and routine, compliance, ability to make transitions, response to frustration \_\_\_\_\_

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Personal qualities: leadership, honesty, responsibility, concern for others, sense of humor \_\_\_\_\_

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To your knowledge, are the parents in agreement with your view of the student?  Yes  No  Don't know

Is there anything else that the schools should know as this student is considered for admission? \_\_\_\_\_

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Do you have any additional information that may be helpful in our evaluation of this student? \_\_\_\_\_

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May we contact you for further information?  Yes  No

TEACHER'S NAME

POSITION

SCHOOL NAME

SCHOOL ADDRESS

TELEPHONE

E-MAIL

SIGNATURE

DATE

Thank you for taking the time to complete this evaluation. Please mail directly to:

New School Montessori  
935 Columbia Avenue  
Lancaster, PA 17603  
[admissions@newschool.net](mailto:admissions@newschool.net)