



School Official Recommendation Form

STUDENT: After filling in your name, grade and address, give this form to two teachers who have taught you an academic subject (English, math, science, social studies or foreign language), with stamped addressed envelopes addressed to:
The Waldorf School of Garden City, Attn: Admissions Department, 225 Cambridge Avenue, Garden City, NY 11530

Student Name

Applicant To Grade

Address

OFFICIAL: The student named above is applying to the Waldorf School of Garden City. Our ability to effectively evaluate this student is helped considerably by your timely and candid insights. All information you furnish will be kept confidential to the extent the law allows. On behalf of this student, we thank you for your cooperation.

Please complete this recommendation and enclose copies of: a) Grades/reports for the previous two years b) Recent teacher reports or comments, if any c) Attendance record d) Standardized test scores

Your Name

Title

School Name and Address

Email Address

Telephone

How long have you known the student and in what context?

What are the first three words that come to mind to describe this student?

1.

2.

3.

Number of students in applicant's grade:

If your school computes class rank, please note student's placement in class or estimated rank (by decile):

Has the student been regular in attendance? Yes No

Is there a problem with tardiness? Yes No If yes, please explain:

Has the student had any recurrent disciplinary problems? Yes No If yes, briefly explain and note any serious discipline action taken:

Has the student been promoted regularly during his or her school career? Yes No If no, please explain:

What are the student's strengths?

In which areas does this student need improvement?

Parents are an important part of our relationship with the student. To the best of your knowledge and with careful consideration to accuracy, please share with us any thoughts you have regarding this applicant's family, including their involvement in your school?

To your knowledge, is the parents' perception of the child compatible with the school's understanding of the child? Please comment...

Are you aware of any family circumstances that affect the student's life at school?

Which word(s) best describe the parent(s) in regard to their child?

1.

2.

3.

The items below ask for your sense of this student's emotional and social growth, intellectual development and relationships within the school community. Please evaluate the student in the following areas by placing a check in the appropriate box.

	Outstanding	Excellent	Good	Average	Below Average	Comments
Intellectual promise	<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"/>	_____
Creative, original thought	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Disciplined work habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Productive class discussions	<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"/>	_____
Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Independence or Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Reaction to setbacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Study habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
OVERALL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Additional comments:

Thank you for the time and information you have provided!