



Saint Brigid School

Student's Name: _____

Current School: _____

Applying for Grade: _____

For Office Use
Received by: _____
Date: _____

TEACHER RECOMMENDATION FORM

Instructions Parents/Guardians: Please fill in the information above, sign below, and give this form to your child's current teacher, along with a stamped envelope addressed to: **Director of Admissions, Saint Brigid School, 2250 Franklin Street, San Francisco, CA 94109.**

I hereby give my child's teacher permission to release information requested on this form to Saint Brigid School. I understand that I will not have access to the information provided.

Parent/Guardian signature _____

To Current Teacher: The above-named student has applied for admission to Saint Brigid School at the grade level indicated. Your knowledge of this student's characteristics will be of great help to us in evaluating this applicant, particularly with respect to features that may not be apparent from grades and test scores. Please mark the appropriate descriptions of the student's abilities and character and provide additional information about his/her strengths and weaknesses. The information will be held in strict confidence and will be used for admissions purposes only. Please mail the completed form directly to Saint Brigid School at the address listed above. Thank you for your time and assistance.

ACADEMIC EVALUATION

Overall academic achievement: Far below expectations Below expectations As expected
 Above expectations Far above expectations

Language Arts: Below grade level At grade level Above grade level

Mathematics: Below grade level At grade level Above grade level

Effort/Motivation: Very limited Limited Sporadic Usually good Highly motivated

Study habits: Disorganized or easily distracted Acceptable Well-organized and focused

Group work skills: Great difficulty Occasional difficulty Usually effective Always effective

Independent play habits: Needs substantial help/supervision Needs frequent help/supervision
 Needs occasional help/supervision Plays well independently

Ability to follow directions: Has great difficulty Needs substantial explanation/help
 Needs occasional explanation/help Responds quickly/effectively

Attention span: Easily distracted Occasionally distracted Generally focused Always focused

Self-control: Needs frequent reminders Needs occasional reminders Exhibits good self-control

Visual perception: Needs development Average Well developed

Fine-motor skills: Needs development Average Well developed

- Gross-motor skills:** Needs development Average Well developed
- Maturity:** Very immature for age/grade Somewhat immature for age/grade Age/grade appropriate
 Above average for age/grade Very mature for age/grade
- Self-confidence:** Low (needs substantial reassurance) Moderate (needs some reassurance)
 Has healthy self-image Appears overly confident
- Consideration of others:** Often considerate Usually considerate Extremely thoughtful
- Social interactions with peers:** Relates poorly to peers Has occasional minor problems with peers
 Healthy relationship with peers Extremely popular
- Class conduct:** Causes frequent disruption Occasional misconduct Usually good Very good
- Parent support:** Overly protective Cooperative/appropriately supportive Indifferent
- Attendance:** Frequently absent Occasionally absent Rarely absent Excellent attendance

Student's strengths: _____

Student's weaknesses/areas of growth: _____

Achievement tests: Type _____ Date _____ Score _____

Does this child receive any special services or additional tutoring? yes no

If yes, please explain: _____

Are you aware of any medical problems or if the student is on any routine medications? _____

Is candidate in good standing and eligible to remain at our school next year? yes no

What is the recommended grade level for the coming year? _____

What is your overall recommendations to Saint Brigid School for the admission of this child?

- Recommend highly Recommend Recommend with reservation (please explain below)
 Prefer not to make a recommendation Do not recommend

Please provide any additional information relevant to your evaluation or recommendation: _____

Evaluation completed by:

Name _____ Date _____ Phone _____

School _____ Grade or subject taught _____

Thank you for your assistance. If you have any questions, please contact
 Admissions, at (415) 673-1032 or admissions@saintbrigidsf.org.
 Please mail this form directly to the Admissions Office at Saint Brigid School.
 2250 Franklin Street San Francisco, CA 94109 Phone: (415) 673-4523 Fax: (415) 674-4187