



TEACHER RECOMMENDATION FORM:

Forms 1 & 2

To be completed by candidate's current teacher and emailed or mailed *directly* to Saint Mary's Hall.

Candidate's Full Name: _____ Applying for Grade: _____
First Middle Last

To the Parent/Guardian: Please read and sign the following statement before giving this form to your child's teacher.
I understand and agree that the information contained in this form will be used only in the selection of candidates for admission to Saint Mary's Hall and will not become part of the applicant's permanent file. I also understand that the completed form will not be made available to me or anyone outside the Saint Mary's Hall Admission Committee. I waive any right to see it.

Parent or Guardian: _____ Date: _____

To the Teacher: The student named above is a candidate for admission to Saint Mary's Hall. The school considers both a candidate's academic and personal qualities when making its admission decisions. **The information you provide is confidential and will be used only in the selection of candidates.** It will not become a part of the candidate's permanent file and will not be available to the candidate or to his/her parents. Please retain a completed copy of this form for your records.

How long have you known this student? _____

Which subject have you most recently taught the student? _____

Expressive & Receptive Language Skills	ADVANCED	AGE APPROPRIATE	EMERGING	NEEDS DEVELOPMENT	NOT EVIDENT	COMMENTS
Articulates clearly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Speaks in complete sentences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Uses intelligible speech	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Listening skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Academic Skills	ADVANCED	AGE APPROPRIATE	EMERGING	NEEDS DEVELOPMENT	NOT EVIDENT	COMMENTS
Ability to follow directions	<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 a group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Self-motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fine motor skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Transitions well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Effort/Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Level of engagement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Attendance	<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"/>	

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Candidate's Name: _____ Applying for Grade: _____

Social/Emotional Development	ADVANCED	AGE APPROPRIATE	EMERGING	NEEDS DEVELOPMENT	NOT EVIDENT	COMMENTS
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Conduct	<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"/>	
Sense of responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Respect for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Expresses feelings appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Demonstrates self-control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Demonstrates a positive attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Responds positively to re-direction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Social relationship with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Interactions with teachers/adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ability to overcome challenges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ability to resolve problems verbally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Exhibits courtesy and respect	<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"/>	
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Family Information	CONSISTENTLY	USUALLY	SOMETIMES	RARELY	DID NOT OBSERVE	COMMENTS
Has realistic expectations of child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Follows through with school recommendations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Participates in school activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cooperates with classroom teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cooperates with school administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Punctual with drop-off and pick-up	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Respectful of teachers' time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Candidate's Name: _____ Applying for Grade: _____

Please explain any poor or average ratings. If none, please take a moment to provide any other comments or feedback about this candidate: _____

What are the child's strengths? _____

What are the child's challenges? _____

Specific Recommendation:

Recommend Recommend with reservations (please explain below) Prefer not to recommend (please explain below)

Comments:

We would appreciate additional comments and observations concerning this student's abilities, attendance, personal qualities, and special interests. We welcome any other information you think might be helpful in our understanding of this student.

Title: _____ Name: _____

School Name and Address: _____

School Phone: (_____) _____ Email: _____

Signature: _____ Date: _____

This candidate's application will not be considered complete until receipt of this form by the Office of Admission.
****When completed, please send this form directly to the Office of Admission. Please do not give a completed form back to the candidate or his/her parents.****

Mail: 9401 Starcrest Drive, San Antonio, TX 78217

Email: admission@smhall.org

Fax: (210) 655-5211