

**First through Sixth Grades**

A Ministry of Calvary Baptist Church 43065 Joy Road

**Fo**

**Admissions@**

**plymouthchristian.org**

**Elementary**

Sarah Jayne Gach, Principal

Phone: 734-459-3505

**ELEMENTARY TEACHER RECOMMENDATION**

Canton, MI 48187

Name of Student: Candidate for Grade: 1 2 3 4 5 6

st nd rd th th th

*(Please circle one)*

**Parent or Guardian**: Please write your student’s name in the space above. Please read and sign the following before giving this form to your student’s teacher. *(Advise them to* ***return it to*** ***Admissions@plymouthchristian.org*** ***or fax)***

I understand and agree that the information contained on this recommendation form is confidential and will be used only in the selection of candidates and will not become part of the candidate’s permanent file. I also agree that this completed form will not be available to candidates, parents, or anyone outside of the Admissions committee, and I hereby waive any right that I may have to see it.

***This student’s application is not complete until this form is received in the Admissions Office.***

Parent/Guardian Signature: Date:

**Teacher:** Please complete this form and return it ***WITHIN ONE WEEK.*** As a current teacher, please evaluate the candidate based on your direct knowledge of him or her. Keep in mind that the applicant should be evaluated according to others of the same chronological age. The members of the Admissions Committee thank you for your interest, cooperation, and honesty. Please check the appropriate boxes and include comments.

**Your comments will be held in strict confidence**.

***This student’s application is not complete until this form is received in the Admissions Office.***

**ACADEMIC SKILLS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | *Consistently* | *Usually* | *Sometimes* | *Seldom* | *Not Observed* |
| Listens to and follows teacher’s directions |  |  |  |  |  |
| Is attentive to group discussions/activities |  |  |  |  |  |
| Contributes appropriately to group discussions/activities |  |  |  |  |  |
| Demonstrates ability to work independently |  |  |  |  |  |
| Perseveres in spite of difficulty |  |  |  |  |  |
| Works cooperatively |  |  |  |  |  |
| Enjoys new challenges |  |  |  |  |  |
| Demonstrates good visual perception |  |  |  |  |  |
| Demonstrates good auditory memory |  |  |  |  |  |
| Exhibits problem solving abilities |  |  |  |  |  |
| Expresses ideas clearly |  |  |  |  |  |
| Moves easily from one activity to another |  |  |  |  |  |
| Demonstrates appropriate energy level |  |  |  |  |  |
| Demonstrates ability to stay on task |  |  |  |  |  |
| Is self-motivated |  |  |  |  |  |

**SOCIAL SKILLS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | *Consistently* | *Usually* | *Sometimes* | *Seldom* | *Not Observed* |
| Responds positively to constructive criticism |  |  |  |  |  |
| Establishes friendships easily |  |  |  |  |  |
| Is comfortable in a group |  |  |  |  |  |
| Shares well |  |  |  |  |  |
| Is considerate of others |  |  |  |  |  |
| Demonstrates self-control |  |  |  |  |  |
| Communicates needs effectively |  |  |  |  |  |
| Takes responsibility for belongings |  |  |  |  |  |
| Is cooperative |  |  |  |  |  |
| Demonstrates appropriate behavior |  |  |  |  |  |
| Exhibits emotional maturity |  |  |  |  |  |

**PHYSICAL DEVELOPMENT**

|  |  |  |  |
| --- | --- | --- | --- |
|  | *Excellent* | *Good* | *Needs Improvement* |
| Gross motor coordination |  |  |  |
| Speech/Articulation |  |  |  |
| Fine motor coordination |  |  |  |
| General health |  |  |  |

# Circle the words that best describe this applicant:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Aggressive | Honest | Immature | Disobedient | Self-disciplined |
| Mature | Oppositional | Cheerful | Manipulative | Conscientious |
| Over-protected | Self-motivated | Irritable | Self-centered |  |
| Shy | Organized | Responsible | Easily discouraged |  |
| Helpful | Positive Leader | Negative Leader | Anxious |  |

Is the student habitually tardy or absent? No Yes…please elaborate:

**CHECK ONE:** Highly recommend Recommend Recommend with reservation Do not recommend

**COMMENTS:** Please comment below with any additional information regarding this candidate and/or the candidate’s family that will be helpful to the PCA Admissions Committee in evaluating his/her application.

***Please call me for additional information regarding this applicant***

Signature of Teacher: Date: Name of School: Phone: School Address: City/Zip:

Teacher’s E-mail:

**FOR THE SCHOOL DIRECTOR/PRINCIPAL**

Regarding Parental Involvement

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | *Consistently* | *Usually* | *Sometimes* | *Seldom* | *Not Observed* |
| Participates in school activities |  |  |  |  |  |
| Supports school policies and procedures |  |  |  |  |  |