

Current Administrator Recommendation

San Diego Consortium of Independent Schools

The following member schools agree to accept this common recommendation form:

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Army & Navy Academy <input type="checkbox"/> The Bishop's School <input type="checkbox"/> The Children's School <input type="checkbox"/> Francis Parker School <input type="checkbox"/> The Grauer School | <ul style="list-style-type: none"> <input type="checkbox"/> La Jolla Country Day School <input type="checkbox"/> Pacific Ridge School <input type="checkbox"/> San Diego Jewish Academy <input type="checkbox"/> Warren-Walker School |
|--|---|

Child's Name _____ **Applying for Grade** _____ **in Fall 20** _____

Please insert your child's name and give this form to the Head of School, Principal or Guidance Counselor with stamped envelopes to the consortium schools to which you are applying.

Parents Our signatures below indicate that we understand that this confidential recommendation is a required and important part of our child's admission application and we will not have access to it.

Parent/Guardian 1 Name (print) _____	Signature _____	Date _____
Parent/Guardian 2 Name (print) _____	Signature _____	Date _____

To the Administrator:

Please complete this form and return to the admissions office. Please retain a copy, as you may be asked to send a recommendation for this student to multiple schools. The completed form may either be mailed in the stamped envelope provided by the student's parents or emailed to admissions@sdja.com. This recommendation will remain confidential and will not become part of the student's permanent record. We sincerely appreciate your cooperation and candor.

Applicant Information

No Opportunity to Observe	Poor	Fair	Average	Good	Excellent	One of the Best Ever
Academic achievement						
Conduct						
Integrity						
Consideration of others						
Social adjustment with peers						
Stability						
Attendance						

Family Information

No Opportunity to Observe		Rarely	Sometimes	Usually	Always
Communication with School					
Attendance at School Functions					
Cooperation with School Rules					
Cooperation with Faculty/Administration					
Fulfillment of Financial Responsibilities					
Participation in School Community					
Participation in Child's Education					

How long have you known this student and in what capacity? _____

Has this student ever been subject to any disciplinary action while attending your school? If yes, please

explain. _____

Please share with us your observation about this student's academic ability, work habits, relationships with peers, classroom behavior, attitude and emotional maturity.

Please comment on this student's contribution to your school community and potential for leadership.

Please comment on the parents' expectations for their child. Please explain the way in which the family supports their child and the policies of your school.

Is there any additional information that can be better conveyed in a phone conversation? Yes ___ No ___ If necessary ___

Hours and phone number where you can be reached _____

Administrator's name _____

School _____

School/Cell phone _____ Email address _____

Signature _____ Date _____

I recommend this student:	Not at All	With Reservation	Mildly	With Confidence	Enthusiastically
Academic ability and promise					
Character and personal promise					
Overall					

Please make any additional comments on this student's appropriateness for the school selected on the first page.

Current English Teacher Recommendation

San Diego Consortium of Independent Schools

The following member schools agree to accept this common recommendation form:

- | | |
|--|---|
| <input type="checkbox"/> Army & Navy Academy
<input type="checkbox"/> The Bishop's School
<input type="checkbox"/> The Children's School
<input type="checkbox"/> Francis Parker School
<input type="checkbox"/> The Grauer School | <input type="checkbox"/> La Jolla Country Day School
<input type="checkbox"/> Pacific Ridge School
<input type="checkbox"/> San Diego Jewish Academy
<input type="checkbox"/> Warren-Walker School |
|--|---|

Child's Name _____ Applying for Grade _____ in Fall 20 _____

Please insert your child's name and give this form to the current English teacher with stamped envelopes addressed to the consortium schools to which you are applying.

Parents Our signatures below indicate that we understand that this confidential recommendation is a required and important part of our child's admission application and we will not have access to it.

Parent/Guardian 1 Name (print) _____	Signature _____	Date _____
Parent/Guardian 2 Name (print) _____	Signature _____	Date _____

To the Teacher:

Please complete this form below and return it to the admissions office. Please retain a copy, as you may be asked to send a recommendation for this student to multiple schools. The completed form may either be mailed in the stamped envelope provided by the student's parents or emailed to admissions@sdja.com. This recommendation will remain confidential and will not become part of the student's permanent record. We sincerely appreciate your cooperation and candor.

Academic Qualities

No Opportunity to Observe	Poor	Fair	Average	Good	Excellent	One of the Best Ever
Reading Comprehension						
Effectiveness of Writing						
Development of Ideas						
Study Habits						
Attention Span						
Ability to Work Independently						
Motivation						
Intellectual Aptitude						
Intellectual Curiosity						
Critical and Abstract Thinking Skills						

Personal Qualities

No Opportunity to Observe	Poor	Fair	Average	Good	Excellent	One of the Best Ever
Creativity						
Self-Confidence						
Leadership Potential						
Reaction to Criticism						
Reaction to Setbacks						
Concern for Others						
Personal Conduct						
Personal Integrity						
Ability to Act Independently						
Ability to Work Cooperatively						
General Level of Maturity						
Sense of Humor						

Please compare this student's academic achievement to his/her ability.

Please describe this student's mental ability with regards to the subject of English. (Consider reading and writing skills, originality, imagination, creativity, etc.)

Please comment on this student's study habits. (Consider initiative, industry, promptness, drive, ability to organize, etc.)

Please comment on this student as a person (Consider maturity, integrity, behavior, respect for others, self-discipline, individuality, sense of community service, etc.)

Other comments and remarks: (Are there any traits, good or bad, not mentioned above that are worthy of note?)

Is there any additional information that can be better conveyed in a phone conversation? Yes ___ No ___ If necessary ___

Hours and phone number where you can be reached _____

Teacher's name _____ Email address _____

Subject(s) and grade level(s) you taught applicant _____

Grades received _____

School _____ School/Cell phone _____

Signature _____ Date _____

I recommend this student	Not at All	With Reservation	Mildly	With Confidence	Enthusiastically
Academic ability and promise					
Character and personal promise					
Overall					

Please make any additional comments on this student's appropriateness for the school selected on the first page.

Current Mathematics Teacher Recommendation

San Diego Consortium of Independent Schools

The following member schools agree to accept this common recommendation form:

- | | |
|--|---|
| <input type="checkbox"/> Army & Navy Academy
<input type="checkbox"/> The Bishop's School
<input type="checkbox"/> The Children's School
<input type="checkbox"/> Francis Parker School
<input type="checkbox"/> The Grauer School | <input type="checkbox"/> La Jolla Country Day School
<input type="checkbox"/> Pacific Ridge School
<input type="checkbox"/> San Diego Jewish Academy
<input type="checkbox"/> Warren-Walker School |
|--|---|

Child's Name _____ **Applying for Grade** _____ **in Fall 20** _____

Please insert your child's name and give this form to the current mathematics teacher with stamped envelopes addressed to the consortium schools to which you are applying.

Parents Our signatures below indicate that we understand that this confidential recommendation is a required and important part of our child's admission application and we will not have access to it.

Parent/Guardian 1 Name (print) _____	Signature _____	Date _____
Parent/Guardian 2 Name (print) _____	Signature _____	Date _____

To the Teacher:

Please complete this form below and return it to the admissions office. Please retain a copy, as you may be asked to send a recommendation for this student to multiple schools. The completed form may either be mailed in the stamped envelope provided by the student's parents or emailed to admissions@sdia.com. This recommendation will remain confidential and will not become a part of the student's permanent record. We sincerely appreciate your cooperation and candor.

Academic Qualities

No Opportunity to Observe	Poor	Fair	Average	Good	Excellent	One of the Best Ever
Study Habits						
Attention Span						
Ability to Work Independently						
Ability to Organize and Communicate Ideas						
Motivation						
Intellectual Aptitude						
Intellectual Curiosity						
Critical and Abstract Thinking Skills						
Follows Directions						
Shows All Necessary Steps						
Comes to Class Prepared						
Completes Homework on Time						
Handwriting Legibility						

Personal Qualities

No Opportunity to Observe	Poor	Fair	Average	Good	Excellent	One of the Best Ever
Creativity						
Self-Confidence						
Leadership Potential						
Reaction to Criticism						
Reaction to Setbacks						
Concern for Others						
Personal Conduct						
Personal Integrity						
Ability to Act Independently						
Ability to Work Cooperatively						
General Level of Maturity						
Sense of Humor						

This student is enrolled in

- Arithmetic
- Pre-Algebra
- Algebra
- Geometry
- Other _____

Section level of course

- Remedial
- Regular
- Advanced
- Mixed-ability

Textbook(s) _____ Suggested math placement for next year _____

Please compare this student's academic achievement to his/her ability.

Please describe this student's mental ability with regards to mathematics. (Consider ability to retain mathematical relationships and principles, drawing generalizations, applying basic principles in word problems and relying on memory versus conceptual processes, etc.)

Please comment on this student's study habits. (Consider initiative, industry, promptness, drive, ability, ability to organize, etc.)

Please comment on this student as a person. (Consider maturity, integrity, behavior, respect for others, self-discipline, individuality, sense of community service, etc.)

Other comments and remarks: (Are there any traits, good or bad, not mentioned above that are worthy of note?)

Is there any additional information that can be better conveyed in a phone conversation? Yes ___ No ___ If necessary ___

Hours and phone number where you can be reached _____

Teacher's name _____ Email address _____

Subject(s) and grade level(s) you taught applicant _____

Grades received _____

School _____ School/Cell phone _____

Signature _____ Date _____

I recommend this student:	Not at All	With Reservation	Mildly	With Confidence	Enthusiastically
Academic ability and promise					
Character and personal promise					
Overall					

Please make any additional comments on this student's appropriateness for the school selected on the first page.
