

Please mail completed form to:
Ms. Brenda Pescoran
Admissions Director

Teacher Recommendation Form

Student's Name: _____ Date: _____

School: _____

Principal's Name: _____

School Phone #: _____ School Fax#: _____

Teacher's Name: _____

Courses Taught: _____

School Official: *Please complete and sign this section of the form. Attach any additional documentation that will be helpful complete your response. Information contained on this form will remain confidential and will not be shared with parents or students. Please mail completed form to the Cristo Rey Newark Admissions Office.*

Academic Ability	Excellent	Good	Average	Below Average
Recall/retention ability				
Verbal ability				
Writing ability				
Mathematical ability				
Reading ability				
Comprehension				
Creative ability				
Intellectual curiosity				
Ability to grasp concepts				
Motivation				

Classroom Performance	Excellent	Good	Average	Below Average
Classroom achievement				
Participation in discussions				
Writing mechanics				
Quality of written idea				
Work habits				
Ability to follow directions				
Preparation for class				
Classwork completion				
Accuracy				
Constructive criticism				

Personal Abilities	Excellent	Good	Average	Below Average
Maturity for grade				
Perseverance				
Grit				
Self-confidence				
Relationship with peers				
Relationship with adults				
Creative and Innovative				
Intellectual curiosity				
Ability to grasp concepts				
Motivation				

School Behavior	Excellent	Good	Average	Below Average
Response to constructive criticism				
Willingness to seek help				
Adaptable and open to growth				
Careful and precise				
Ability to work in a group				
Ability to work independently				
Attention span				
Interaction with peers				
Respect for others				
Conduct				

Service/Leadership	Excellent	Good	Average	Below Average
Willingness to serve				
Willingness to befriend others				
Leadership, pride, loyalty, attitude				
Spiritual & personal development				
School involvement				

Please circle the words that describe this student:

- | | | | | | |
|------------------|---------------|-------------|---------------|----------------|-------------------|
| articulate | dedicated | hardworking | cheerful | compassionate | aggressive |
| perfectionist | vivacious | optimistic | energetic | confident | disobedient |
| organized | conscientious | independent | popular | humorous | follower |
| responsible | honest | loner | social | dependent | irresponsible |
| self-disciplined | discouraged | passive | assertive | anxious | negative leader |
| sympathetic | amiable | attentive | self-centered | over-protected | dishonest |
| broad-minded | distractible | restless | impulsive | irritable | easily frustrated |

Please comment on the student-parent relationship:

Is there information that you would prefer to communicate by phone? Yes No

If yes, the Admissions Office will contact you.

Email: _____ Phone #: _____

Signature: _____ Date: _____