

CALVARY CHAPEL HIGH SCHOOL

Confidential Teacher Recommendation

*Please complete this form and return it directly to:
CCHS, Attn: Admissions office, 1002 David Ave., Pacific Grove 93950*

Student: <i>Please fill out the following information and request a reference from your Teacher..</i>	
Student Name: _____	Grade applying for: ____
School Name: _____	
Teacher: _____	
Class: _____	

Please indicate your ratings by a check mark; use a question mark if you have insufficient evidence. Your candid estimate will be of invaluable assistance to the admissions committee, and your comments will be held in the strictest confidence.

	1	2	3	4	5
Academic Potential	Exceptionally promising	Generally strong	Average-capable of satisfactory work	Below average: ____ marginal ability ____ lacks motivation	Questionable candidate
Personal Qualities	Outstanding – leads and participates	Generally strong	Average	Below average-immature	Very immature for age
Emotional Stability	Exceptionally stable	Well balanced	Generally well balanced	____ excitable ____ unresponsive ____ distractible	____ hyper-emotional ____ apathetic
Summary	Outstanding	Above average	Average	Below average	Poor

Please comment on the applicant's attitude toward school:

Describe his/her academic strengths:

To your knowledge, has the applicant had any history of involvement with drugs, alcohol, or juvenile delinquency? _____ If yes, please explain:

Has the applicant ever been suspended or expelled? _____ If yes, explain:

To your knowledge, has the applicant had any history of misconduct or behavior problems?
_____ If yes, please explain:

Does the candidate have any history of learning disability or has he/she required any special help
to meet academic requirements? _____ If yes, please explain:

Any additional comments?

Name (please print)

Signature

Subject(s) taught

Phone Number (if we have additional questions)

Date