



CONFIDENTIAL TEACHER RECOMMENDATION FORM

For applicants to second through eighth grade

Please complete and mail to:

San Diego Hebrew Day School
3630 Afton Road, San Diego, CA 92123
858-279-3300, Fax 858-279-3389
e-mail: admissions@ssdhds.org

TO THE PARENT: Please complete this section and then give this form to your child's teacher.
(S)he will mail it directly to our school.

Name of Student: _____ Date of Birth: _____

Address: _____

The student listed above is applying for admission to _____ Grade.

TO THE TEACHER: This form has been designed to better allow an open exchange of information about the student whose name appears above. Your candid assessment of the applicant is very helpful in our attempt to find school placement appropriate for both the student and the family. All recommendations are reviewed with the full awareness that children are constantly changing and developing. We greatly appreciate your taking the time and effort to complete and return this form. Please know that the professional comments you share will be held in strictest confidence.

Name of teacher (Please Print)

Signature & Date

Name of School/Organization

School address

City, State, Zip

School Phone School Fax

Your judgments are used solely for the admission process and are held in strictest confidence.
We thank you in advance for the help your comments provide.

Character and Personality Traits	Advanced for age	Appropriate for age	Needs development	Not at acceptable level	Comments:
Conduct					
Leadership					
Emotional maturity/stability					
Social relationship with peers					
Self confidence					
Integrity					
Sense of humor					
Sense of responsibility					
Interaction with teachers/adults					
Participation in life of the school					
Creativity					
Respect for others					
Concern for others					

Academic Traits	Advanced for age	Appropriate for age	Needs development	Not at acceptable level	Comments:
Academic potential					
Academic achievement					
Self-motivation					
Effort/initiative					
Study habits/organization of work					
Intellectual curiosity					
Attention Span					
Commitment to homework					
Ability to follow directions					
Ability to work independently					
Ability to work in a group					
Ability to express ideas orally					
Ability to express ideas in writing					
Attendance					
Participation in class					

Family Information	Consistently	Usually	Sometimes	Rarely
Communicates openly with school				
Participates in school activities				
Cooperates with classroom teacher				
Cooperates with administration				
Follows the rules and policies of the school				
Has realistic expectations for their child				

Please circle all words that you feel describe this student:

aggressive	confident	follower	irritable	over-protected	self-centered
anxious	conscientious	happy	manipulative	passive-resistant	self-disciplined
disobedient	helpful	motivated	perfectionist	shy	cheerful
negative leader	positive leader	social	influential	organized	honest
responsible	well-liked	easily discouraged			

Does the child need extra assistance from the teacher?

Is there anything unusual or exceptional about this child that you feel deserves special consideration?

I have known this student for _____ years _____ months

S/he is enrolled at our school in the _____ class/grade

This class has _____ students and _____ teachers

Would we be able to make a more informed decision if we had a conversation with you? YES NO

Please let us know the best time to call, should we want to reach you.

Phone

Best hours to reach you

Thank you for your time and assistance.