



CONFIDENTIAL TEACHER RECOMMENDATION FORM

For applicants to Preschool

Please complete and mail to: San Diego Hebrew Day
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 Child: _____ Date of Birth: _____

Address: _____

The student listed above is applying for admission to Preschool @ San Diego Hebrew Day

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 young 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

Name of School/Organization

Date

School Address

City, State, Zip

School Phone

School Fax

I have known this child _____ years, _____ months.

(S)he is enrolled in our school _____ days per week, _____ hours per day, in the _____ class/grade.

This class has _____ students and _____ teacher(s).

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.

Compared to all the students this age whom you have taught, please rate this student in the following areas:

Personal and Social Development	Not Evident	Emerging	Age Appropriate	Advanced
Listens to and Follows Directions				
Works and Plays Cooperatively with Peers				
Works and Plays Independently				
Participates During Group Activities				
Demonstrates Creativity				
Follows School and Classroom Rules				
Handles Transitions with Ease				
Demonstrates Consideration for Others				
Problem-Solves and Resolves Conflicts				
Engages in New Activities				
Demonstrates Self-Confidence				
Takes Turns and Shares				
Asks For Help When Needed				
Tolerates Frustrations				
Controls Impulses				
Expresses Feelings Appropriately				

Language and Speech	Not Evident	Emerging	Age Appropriate	Advanced
Ability to Express Thoughts, Needs and Emotions Verbally				
Language Fluency and Vocabulary				
Articulation of Words (Ability to be Understood)				
Comprehension of and Ability to Follow Verbal Instructions				
Ability to Speak in Full Sentences				

Physical Development	Not Evident	Emerging	Accomplished
Rides a Tricycle			
Runs, Walks and Moves Smoothly			
Holds Scissors and Can Effectively Use to Cut			
Holds Writing Instruments with Proper Grasp			
Applies Sufficient Pressure When Using Writing Instruments			

Self Help Skills	Not Evident	Emerging	Accomplished
Ability to Use the Toilet Independently			
Ability to Dress Without Assistance			
Ability to Eat Without Assistance			

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 comment on the following (please attach separate page if necessary):

Please describe this student's mastery of basic classroom skills how he/she behaves in your classroom:

Does this child require extra assistance from the teacher? Yes No

If yes, please describe the kinds of situations in which extra help is needed:

Does this student separate easily from parents? Yes No

Do the parents separate easily from the student? Yes No

If no for either or both of the above, please describe how separations transpire:

Are there any concerns with the student's attendance or promptness with arrival and departure?

Please share your observations about the parents' expectations for their child and the way in which the family supports their child: _____

Please comment on the family's adherence to the policies and procedures of your school and their support for school programs: _____

Please share any other comments and remarks. (Consider traits, good or bad, not mentioned above which are worthy of note.): _____

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.