

Teacher Recommendation



Please return this form to:

Admissions Director

Centennial Montessori School, 27 Tenth Avenue, San Mateo, CA 94401, admissions@centennialmontessori.org

Name of Student: _____

PARENT OR GUARDIAN

Please read and sign before submitting to present school's registrar.

Applying for grade _____

I understand and agree that the information contained on this teacher recommendation form is confidential and will be used only in evaluating and selecting applicants and will not become part of the student's permanent record. I also agree that this completed form will not be available to candidates, parents or anyone else outside of the Centennial Montessori Admission Committee, and I waive any right that I may have to see it.

Signature of Parent or Guardian

Date

TEACHER

Please complete all of this form and return it to Centennial Montessori School. Information that does not appear on entrance exams or school records is most helpful in enabling us to evaluate the applicant. Your input regarding the student's abilities and needs helps us determine whether our program is right for the applicant. This information is strictly confidential. It is used only in evaluating applicants and does not become part of their permanent records.

Name _____ School _____

Position _____ Phone _____ Date _____

What are the first few words that come to mind when you think of this child?

ACADEMICS AND WORK HABITS

Usually Sometimes Seldom

Pursues tasks to completion/perseveres in spite of difficulty			
Grasps concepts quickly			
Demonstrates intellectual curiosity			
Enjoys complex tasks or ideas			
Exhibits a variety of interests			
Follows oral direction			
Follows written direction			
Plans and uses time well			
Works well with others			

SOCIAL AND EMOTIONAL DEVELOPMENT

Usually Sometimes Seldom

Is self-confident with peers and adults			
Speaks up in a group discussion			
Expresses emotions appropriately			
Is helpful in the classroom			
Cooperates well in a group			
Is self-disciplined			
Shows empathy and tolerance towards others			
Shows a willingness to take risks			
Helps to promote cooperative classroom environment			
Is respectful of adults			
Respects property			

What do you consider to be the student's greatest strengths?

What do you consider to be the child's greatest challenges?

How long and in what capacity have you know the applicant?

Additional Comments:

I recommend this student:

enthusiastically with confidence with reservation do not recommend

PARENT(S) INVOLVEMENT *to be completed by your school's current head of school*

	Usually	Sometimes	Seldom
Attends parent conferences			
Participates in school activities			
Meets financial obligations			
Cooperates with school policies and procedures			

Signature of Head of School

Date