

SCHOOL RECOMMENDATION FORM GRADES 1-8

Name of Applicant ______

Applying for Grade ______ In the School Year Beginning ______

To Parent or Guardian:

Please submit this form to your child's current school.

To Teacher or Guidance Counselor:

This student is seeking admission to Rosarian Academy. We would appreciate a candid appraisal of this applicant. This appraisal is confidential and will be used only for the admissions process. Its contents will not be shared with parents. Please be advised that you may be contacted for further verification.

| Academic Ability | Excellent | Good | Fair | Poor |
|-----------------------------|-----------|------|------|------|
| Attitude/ Cooperation | Excellent | Good | Fair | Poor |
| Conduct/ Self-Discipline | Excellent | Good | Fair | Poor |
| Group Participation | Excellent | Good | Fair | Poor |
| Integrity/Honesty | Excellent | Good | Fair | Poor |
| Leadership | Excellent | Good | Fair | Poor |
| Motivation/Effort | Excellent | Good | Fair | Poor |
| Study Habits | Excellent | Good | Fair | Poor |





Is the above named student in good standing and eligible to remain in your school for the next grade level? _____ Yes _____ No If no, please explain.

Has any disciplinary action ever been taken regarding this candidate? ____ Yes ____ No If yes, please explain.

Are parents cooperative and supportive of the school? _____ Yes _____ No

To your knowledge, has this student been evaluated for any physical, emotional or academic reasons? _____Yes _____No

Please provide any additional information that may be helpful to us as we consider this applicant for admission.

| Your Name | |
|--|-------|
| Title | Date |
| Name of School | Phone |
| Upon completion, please mail or fax directly to: Office of Admission Rosarian Academy 807 North Flagler Drive West Palm Beach, Fla. 33401 Office: 561-832-5131 Fax: 561-820-8750 | |