***Grades 2-12***

**St. Martin’s Lutheran School**

TEACHER RECOMMENDATION FORM

The AIMS member schools abide by the policy that all information provided on the Common Referral Form will be held in the strictest confidence and will not, directly or indirectly be shared with students, parents or guardians.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of Student |  | Current School |  | Present Grade |  |
| Name of Teacher |  | Subject Area |  |[ ]  honors |[ ]  Standard |[ ]   |
| I have known this student for |  | Years, |  | months | Attendance is |[ ]  regular |[ ]  not regular |
| *The first words that come to mind when I think of this student are* |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Academic Ability** | **Outstanding** | **Above Average** | **Average** | **Below Average** |
| Verbal ability |[ ] [ ] [ ] [ ]
| Mathematical ability |[ ] [ ] [ ] [ ]
| Creative ability |[ ] [ ] [ ] [ ]
| Intellectual curiosity |[ ] [ ] [ ] [ ]
| Ability to grasp new concepts |[ ] [ ] [ ] [ ]
|  |
| *Please comment on this child’s academic strengths and weaknesses.* |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Classroom Performance** | **Outstanding** | **Above Average** | **Average** | **Below Average** |
| Classroom achievement |[ ] [ ] [ ] [ ]
| Participation in discussions |[ ] [ ] [ ] [ ]
| Writing mechanics |[ ] [ ] [ ] [ ]
| Quality of written ideas |[ ] [ ] [ ] [ ]
| Oral expression |[ ] [ ] [ ] [ ]
| Work habits |[ ] [ ] [ ] [ ]
| Ability to follow directions |[ ] [ ] [ ] [ ]
| Preparation for class |[ ] [ ] [ ] [ ]
| *Please comment on this child’s learning style. Please also note any special needs and any observed discrepancies between*  |
| *academic ability and classroom performance.* |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **School Behavior** | **Outstanding** | **Above Average** | **Average** | **Below Average** |
| Motivation |[ ] [ ] [ ] [ ]
| Ability to work in group |[ ] [ ] [ ] [ ]
| Ability to work in independently |[ ] [ ] [ ] [ ]
| Response to  |[ ] [ ] [ ] [ ]
| Oral expression |[ ] [ ] [ ] [ ]
| Work habits |[ ] [ ] [ ] [ ]
| Ability to follow directions |[ ] [ ] [ ] [ ]
| Preparation for class |[ ] [ ] [ ] [ ]
| *Please comment on this child’s learning style. Please also note any special needs and any observed discrepancies between*  |
| *academic ability and classroom performance.* |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Personal Abilities** | **Outstanding** | **Above Average** | **Average** | **Below Average** |
| Maturity for grade |[ ] [ ] [ ] [ ]
| Maturity for age |[ ] [ ] [ ] [ ]
| Perseverance |[ ] [ ] [ ] [ ]
| Self-confidence  |[ ] [ ] [ ] [ ]
| *Please comment on this student’s social and emotional development.*  |
|  |

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| **Please circle the words that describe this student:** |
| Aggressive | Passive-resistant | Responsible | Organized | Assertive | Passive |
| Irresponsible | Self-disciplined | Follower | Social | Popular | Distractible |
| Independent | Loner | Energetic | Distracting | Positive leader | Articulate |
| Disobedient | Confident | Negative leader | Perfectionist | Manipulative | Motivated |
| Humorous | Vivacious | Restless | Conscientious | Anxious | Cheerful |
| Self-centered | Compassionate | Honest | Irritable | Easily discouraged | Dishonest |
| Impulsive | Easily frustrated | Kind | Well-liked | Other: |  |

|  |
| --- |
| Please note any special attributes of this student that would help us to better understand him or her (e.g., English as a second language, special talent in arts or athletics, etc.) |
|  |
| Please describe the parents’ relationship with teachers and the school: |
|  |

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| --- |
|  |
| Would you be willing to discuss this child by telephone if we have further questions? |[ ]  Yes |[ ]  No |
|  |
| Is there information about this child that would be better communicated by telephone? |[ ]  Yes |[ ]  No |
| Evaluator’s Name (please print)  |  | Signature |  | Date |  |
| Email Address |  | Telephone |  |
|  |
| **For School Administrator** |  |  |  |  |
| Has the family satisfied all financial obligations to your school? |[ ]  Yes | [ ]   | No | Initials |  |
| *(Many AIMS schools will not enroll a student until the family has met all financial obligations to the school previously attended by the student.)* |

 **Please return to:** Admission’s Office Email: kpeenstra@stmartinsonline.org

 St. Martin’s School Phone: (410) 263-8016

1120 Spa Road Fax: (410) 280-2024

Annapolis, MD 21401