



ADMINISTRATIVE RECOMMENDATION FORM

FORM APP1011-AR

We are a Christ-Centered Learning Community

STUDENT INFORMATION

Student Name:		Current Grade:	
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ADMINISTRATIVE OBSERVATIONS

Evaluate this student based on observed situations by circling the appropriate number						
1= Rarely 2= Seldom 3= Sometimes 4= Usually 5= Consistently UTJ= Unable to Judge						
Appears to be industrious	1	2	3	4	5	UTJ
Exhibits good study habits	1	2	3	4	5	UTJ
Is cooperative with instructors	1	2	3	4	5	UTJ
Exhibits positive leadership qualities	1	2	3	4	5	UTJ
Appears to be socially accepted by peers	1	2	3	4	5	UTJ
Behavior patterns are constructive and positive	1	2	3	4	5	UTJ
Parents give evidence of supporting mission of the school	1	2	3	4	5	UTJ
Financial obligations are met in a timely manner	1	2	3	4	5	UTJ

ADMINISTRATIVE FEEDBACK

Has the student encountered any attendance or discipline problems in the past? Explain.

Was this student expelled or asked to leave your school? Explain.

Any additional comments that may be helpful in understanding this student?

SIGNATURE

Name:		School:		Position:	
Signed:				Date:	

This evaluation may be shared with the student and/or family unless you specifically request that it be kept confidential. Please return to the student/parent requesting the recommendation or mail to the address below attention Registrar's Office.