



CLARK  
HIGH SCHOOL

Application for Admission 2015-2016  
Math Teacher  
Recommendation

**STUDENT:** Please print your name below and give this form to your current Math teacher with an envelope.

\_\_\_\_\_  
Name of Student

\_\_\_\_\_  
Applicant for Grade

**TEACHER** This student recommendation will remain confidential and will not become part of the student's permanent record. When you have completed it, please send it to Clark School in a sealed envelope provided by the student. Thank you for your cooperation and candor.

\_\_\_\_\_  
Name of Teacher

\_\_\_\_\_  
School

\_\_\_\_\_  
School Address

\_\_\_\_\_  
How long have you known the student?

\_\_\_\_\_  
What words would you use to describe him or her?

Please list the classes you have taught this student and the level of course difficulty (accelerated, honors, regular, etc), beginning with the most recent.

\_\_\_\_\_  
List text(s) used in this course and the chapters you expect to cover by the end of the year:

\_\_\_\_\_  
To what degree has this student mastered the material covered in the course so far?

**In which course would you recommend this student be placed next year (circle one)?**

**Math Concepts:** (student entering below grade-level)

☐

**Pre-Algebra:** Concepts      College Prep      Honors

**Algebra I:** Concepts      College Prep      Honors

**Consumer Math:** Concepts      College Prep

**Geometry:** Concepts      College Prep      Honors

**Algebra II:** Concepts      College Prep      Honors

**Pre-Calculus:**      College Prep      Honors

**Calculus:**      College Prep      Honors

**Describe this student's ability in problem solving and in dealing with abstract concepts.**

**Describe this student's class participation and working relationship with other students and with adults.**

**What are the student's strengths, both as a student and a person?**

**In what areas does this student need improvement, both as a student and a person?**

**Is there a problem with conduct, tardiness or absence? If so, please explain.**

**Please assess the student in the following areas:**

**One of the top few**

**Excellent**

**Good**

**Average**

**Below Avg**

Academic Potential					
Academic Achievement					
Intellectual Curiosity					
Intellectual Curiosity					
Effort/Determination					
Ability to Work Independently					
Organization					
Creativity					
Willingness to Take Intellectual Risks					

Concern for Others					
Honesty/Integrity					
Self-esteem					
Maturity (relative to age)					
Responsibility					
Respect Accorded by Faculty					
Respect Accorded by Peers					
Emotional Stability					
Overall Evaluation as a Person					
Overall Evaluation as a Student					

**Please comment on this student’s character and personality.**

**Is there any indication that this student may have special or unique learning needs?**

**To your knowledge, is the parent’s perception of their child compatible with the school’s understanding of the child?**

**Is there any other information that would be helpful to us in evaluating the ability of this student to perform at Clark School?**

TEACHER SIGNATURE

DAYTIME PHONE

EMAIL

*Thank you for taking the time to complete this evaluation.*

