

Friends School of Wilmington Teacher Recommendation Form

Dear Teacher:

The student listed below has applied to our school. As part of our admissions procedure, we require a reference from the applicant's most recent teacher. Thank you in advance for taking a moment to fill out the following short form thoroughly and candidly. If you have any questions, please contact the Admissions Office at 910.791.8221.

**Please return form directly by mail to: Friends School of Wilmington, Attn: Admissions, 207 Pine Grove Dr., Wilmington, NC 28403
or FAX the completed form to 910-792-9274 or email to: admissions@fsow.org**

The following questions pertain to: (Applicant's Name) _____ Current Grade _____

What are the first words which come to mind when describing this student? _____

Please comment on this child's strengths, challenges, special needs, and special interests: _____

Based on your experience with this child, please evaluate the developmental progress in relation to peer group in the areas listed:

1 Very Advanced ▪ 2 Advanced ▪ 3 On Target ▪ 4 Slightly Delayed ▪ 5 Very Delayed ▪ "?" Unsure

Directions for age group ratings below.	1. Physical self-care	1	2	3	4	5	?
	2. Interactions with peers	1	2	3	4	5	?
Preschool Teachers:	3. Interactions with adults	1	2	3	4	5	?
Please respond to the first 7 items only.	4. Ability to focus and complete tasks	1	2	3	4	5	?
	5. Ability to understand spoken directions	1	2	3	4	5	?
Kindergarten Teachers:	6. Coordination (large motor development)	1	2	3	4	5	?
Please respond to the first 11 items.	7. Fine motor development	1	2	3	4	5	?
	8. Letter/symbol formation	1	2	3	4	5	?
1 st through 7 th grade Teachers:	9. Reading	1	2	3	4	5	?
Please respond to all items.	10. Writing	1	2	3	4	5	?
	11. Math	1	2	3	4	5	?
	12. Responsibility	1	2	3	4	5	?
	13. Honesty/Integrity	1	2	3	4	5	?

Has this child's parents indicated that they were dissatisfied with you as a teacher, or with the school you are employed in? _____

If yes, please elaborate: _____

Is this child a discipline problem for you or others? Please explain: _____

How likely is this child to distract or be easily distracted by others? _____

Has this child been identified as "gifted," or do you feel that this child is unusually talented in any academic, artistic or other areas?

Please elaborate: _____

Has this child been recommended for evaluation, been evaluated, or been identified as having learning differences, developmental delays, visual or auditory processing difficulties, or behavioral or emotional disorders (ADD, ADHD, bipolar disorder, OCD, etc.)? _____

Do you suspect that this child may have any of the above delays or differences? Please explain: _____

To your knowledge, has medication been recommended for, or been taken by this child to address any of the above diagnoses? _____

If yes, please explain: _____

Teacher Signature _____ School _____ Date _____ Telephone _____