



Teacher Recommendation

Grades 6–12

10800 Academy Drive • Fredericksburg, Virginia 22408 • 540.898.0020 • Fax: 540.898.8951 • www.fredericksburgacademy.org

Thank you for taking the time to complete this evaluation. The student named below is an applicant for admission to Fredericksburg Academy. Your expertise and insight are invaluable to us as we gather information about this applicant.

All information shared is considered confidential and will not be viewed by the applicant's parents/guardians nor does it become part of the student's permanent record.

Applicant's Name: _____ Current Grade: _____

Teacher's Full Name (*Please Print*): _____

Subject(s) Taught/Textbook(s) Used: _____ I have known this student for _____ months/years.

ACADEMIC PERFORMANCE

Language Arts (LA)	SUPERIOR	GOOD	AVERAGE	BELOW AVERAGE	COMMENTS
Oral Language Skills					
Reading Comprehension Skills					
Writing Skills					

Mathematics (MA)	SUPERIOR	GOOD	AVERAGE	BELOW AVERAGE	COMMENTS
Math Facts/Computation Skills					
Math Concept Development					
Problem Solving Skills					

Has additional tutoring or outside help been recommended? LA___ MA___ Been given? LA___ MA___

Academic Traits	ADVANCED FOR AGE	APPROPRIATE FOR AGE	NEEDS DEVELOPMENT	NOT AT ACCEPTABLE LEVEL	COMMENTS
Academic potential					
Academic achievement					
Self-motivation					
Effort/initiative					
Study habits/organization					
Intellectual curiosity					
Level of engagement					
Commitment to homework					
Ability to follow directions					
Ability to work independently					
Ability to work in a group					
Ability to express ideas orally					
Ability to express ideas in writing					
Attendance					
Participation in class					

(Continued on back)

Character and Personality Traits	ADVANCED FOR AGE	APPROPRIATE FOR AGE	NEEDS DEVELOPMENT	NOT AT ACCEPTABLE LEVEL	COMMENTS
Conduct					
Leadership					
Maturity					
Social relationships with peers					
Self-confidence					
Integrity					
Sense of humor					
Sense of responsibility					
Interaction with teachers/adults					
Participation in life of the school					
Creativity					
Respect for Others					
Concern for Others					

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

What frustrates this student? _____

Comments: We would appreciate additional comments and observations concerning any areas that may need to be addressed or any behavioral/discipline issues regarding this student. We welcome any other information you think might be helpful in our understanding of this student.

Parental cooperation and involvement with the school (please describe): _____

Teacher's Signature: _____ Date: _____
 Title/Position: _____ School: _____
 School Address: _____
 Phone: _____ E-mail: _____

Thank you for your assistance in providing us with this information.
**Please mail this form directly to: Director of Admission, Fredericksburg Academy,
 10800 Academy Drive, Fredericksburg, Virginia 22408.**