

Teacher Recommendation Form

The purpose of this form is to request a general assessment of the student, which will become a part of his or her application for admissions to St. Vincent Pallotti High School. The contents of this assessment are strictly confidential.

Student's Last Name: _____ First Name: _____

Teacher's Name: _____ Current Position: _____

Current School: _____ Date: _____

Evaluator – Please assess this student for the following characteristics. Place an “x” in the box that indicates how you would rate the student.

| | OUTSTANDING | GOOD | SATISFACTORY | IMPROVEMENT NEEDED | UNSATISFACTORY |
|----------------------------------|-------------|-------|--------------|-----------------------|----------------|
| Ability to work independently | _____ | _____ | _____ | _____ | _____ |
| Ability to work in a group | _____ | _____ | _____ | _____ | _____ |
| Ability to follow directions | _____ | _____ | _____ | _____ | _____ |
| Achievement related to potential | _____ | _____ | _____ | _____ | _____ |
| Organization of time and work | _____ | _____ | _____ | _____ | _____ |
| Self-motivation | _____ | _____ | _____ | _____ | _____ |
| Oral Expression | _____ | _____ | _____ | _____ | _____ |
| Conduct | _____ | _____ | _____ | _____ | _____ |
| Integrity | _____ | _____ | _____ | _____ | _____ |
| Leadership | _____ | _____ | _____ | _____ | _____ |
| Emotional Maturity | _____ | _____ | _____ | _____ | _____ |
| Relationship with peers | _____ | _____ | _____ | _____ | _____ |
| Relationship with adults | _____ | _____ | _____ | _____ | _____ |
| Concern for others | _____ | _____ | _____ | _____ | _____ |
| Self-confidence | _____ | _____ | _____ | _____ | _____ |

Place an “x” beside the words that best describe the student.

Motivated _____ Well-Liked _____ Helpful _____ Outspoken _____ Shy _____
 Aggressive _____ Anxious _____ Articulate _____ Cheerful _____ Follower _____
 Social _____ Honest _____ Irritable _____ Manipulative _____ Leader _____

If you would like to provide any additional information please attach a **typed** letter with the teacher recommendation form.

Submit this form to:
 St. Vincent Pallotti High School
 Office of Admissions
 Email: admissions@pallottihs.org
 Fax: 301-725-5381
 113 St. Mary's Place, Laurel MD 20707



ST. VINCENT PALLOTTI
 — HIGH SCHOOL —