

Ashbrook Independent School New Admissions - Teacher Recommendation Form

Use this form for students *entering grades 1 to 4*. This form is completed by the student's current school teacher. This form must be in the Admissions File prior to the student evaluation visit.

This portion is completed by **Parent** prior to giving to Teacher completing the

recommendation.	
Student's First & Last Name	Applicant for Grade
DATED NEEDED BY THE SCHOOL:	
,	to arrive in the postal mail or scan/email to RE the scheduled Student Assessment Visit)
This portion is completed by <u>Teacher</u> with and behavior progress.	information about the student's academic
Teacher Name (printed)	Job Role
School & Location	Phone
Signature	Date
•	ation form according to your experience with abrook staff appreciates your time and effort
If you have any questions regarding the pro	ocess for completing this form, please contact

Please mail, email, or FAX to:

the parent and/or Ashbrook's Admissions at admissions@ashbrookschool.org

Ashbrook Independent School 4045 SW Research Way Corvallis, OR 97333 541-766-8313 Fax 541-766-1066 www.ashbrookschool.org

Recommendation for Student:

ACADEMIC Evaluation: (please check)

☐ limited ☐ fair ☐ average ☐ good ☐ excellent ☐ outstanding
Academic achievement:
☐ limited ☐ fair ☐ average ☐ good ☐ excellent ☐ outstanding
Motivation:
☐ does very little ☐ only when required ☐ some ☐ well motivated ☐ sets high goals
Intellectual curiosity:
☐ limited ☐ occasional spark ☐ in one area only ☐ usually effective ☐ intense and varied
Ability to work in a group:
☐ needs supervision ☐ needs frequent help ☐ needs help occasionally ☐ always works well
Participation in discussion:
☐ rarely ☐ when called on ☐ occasionally ☐ joins in readily ☐wants to dominate
Ability to write:
□limited ideas & mechanics □ mechanics good □ good ideas □ ideas & mechanics excellent
Use of time:
☐ uses poorly ☐ occasionally wastes ☐ usually uses well ☐ always uses effectively
Follows directions:
☐ needs much explanation ☐ occasionally needs help ☐ quickly and correctly
Uses suggestions and corrections:
☐ rarely heeds ☐ needs reminding ☐ usually ☐ always
Seeks help when needed:
☐ rarely ☐ occasionally ☐ usually ☐ always
Attention span:
☐ easily distracted ☐ occasionally distracted ☐ usually ☐ good ☐ very good
Initiative:
☐ needs 1-on-1 attention ☐ needs help starting ☐ can expand ideas presented ☐ self starter
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PERSONAL Evaluation: (Please check)
PERSONAL Evaluation: (Please check) Integrity:
PERSONAL Evaluation: (Please check) Integrity: questionable trustworthy highly developed
PERSONAL Evaluation: (Please check) Integrity:

Please answer the following questions about the student. Feel free to attach additional information or documentation as needed.

1.	Comment on the student's academic ability. Please specify reading, writing, and math.
2.	Please comment on the classroom setting you think would most benefit this student and what teaching techniques work best with him/her.
3.	Describe how you see this child.
4.	Does this student receive support services, e.g., IEP, TAG, speech, counseling support, ESL?
5.	Please add comments which you believe would be helpful in assisting us in providing a beneficial educational program for this student.