



STUDENT RECOMMENDATION BY A TEACHER

NOTE: This form must be signed by a parent or guardian and then given to a current TEACHER at the student's present (or most recent) school.

Applicant's Name: _____
(Last) (First) (Middle)

School: _____

School Address: _____

Parent Consent for Release of Information: _____
(Signature of Parent/Guardian)

NOTE: This student recommendation will be held in strict confidence. We request that this form be completed by a current teacher who knows the student well. We value the elementary/junior high school recommendation as a critically important consideration for admission. Please feel free to attach additional pages if more space is needed.

I. **ACADEMIC RECOMMENDATION:** This recommendation should reflect your opinion of the applicant's ability or potential to succeed in a college preparatory curriculum.

_____ I strongly recommend this student. (Student is currently working at an "A" or "B" level and has the ability and work habits to continue at this level at Sierra Lutheran High School.)

_____ I recommend this student. (Student is currently performing at a "C" level and has the ability and work habits to continue at this level or better at SLHS.)

_____ I recommend this student with reservations. (Briefly explain below.)

_____ I do not recommend this student. (Please explain.)

Please briefly explain your Academic Recommendation. We value your comments.

II. **CHARACTER RECOMMENDATION:** This recommendation should reflect the desire and motivation this student has for entering a "value based" community and for growing spiritually, socially and in service to others.

_____ I strongly recommend this student because he/she demonstrates attitudes and values which will make him/her an asset to the student body at SLHS.

_____ I recommend this student because he/she demonstrates a willingness to grow in his/her values and attitudes. Though occasionally immature, he/she responds well to direction and/or correction.

_____ I recommend this student with reservations. (Briefly explain below.)

_____ I do not recommend this student. (Please explain.)

Please briefly explain your Character Recommendation. _____

III. Please check the appropriate category listed below:

| | <u>Excellent</u> | <u>Commendable</u> | <u>Acceptable</u> | <u>Questionable</u> | <u>Unacceptable</u> |
|--|------------------|--------------------|-------------------|---------------------|---------------------|
| Academic Motivation | _____ | _____ | _____ | _____ | _____ |
| Academic Ability | _____ | _____ | _____ | _____ | _____ |
| Academic Achievement | _____ | _____ | _____ | _____ | _____ |
| Integrity | _____ | _____ | _____ | _____ | _____ |
| Character | _____ | _____ | _____ | _____ | _____ |
| Behavior/Cooperation | _____ | _____ | _____ | _____ | _____ |
| Leadership | _____ | _____ | _____ | _____ | _____ |
| Social Development (respect for teachers, classmates, others) | _____ | _____ | _____ | _____ | _____ |

IV. CO-CURRICULAR INVOLVEMENT/AWARDS: Please list this student’s co-curricular activities along with any awards (academic, service, athletic, leadership) he/she has received.

V. SPECIAL CIRCUMSTANCES: Please explain any special circumstances (learning disabilities, health problems, unstable family situation, emotional problems, social immaturity, etc.) we should be aware of should this student be admitted to Sierra Lutheran High School.

Thank you for your time, care and concern in filling out this recommendation form. Your valuable input is an essential part of our admissions process.

(print) Teacher’s name: _____ Subject/grade taught _____

Teacher’s signature: _____ Date: _____

Telephone number(s) where you can be reached: _____

Please return this form along with the Principal’s form (requiring transcript and standardized test scores) to:

SIERRA LUTHERAN HIGH SCHOOL
3601 Romans Road
Carson City, NV 89705
775-267-1921