



WESLEYAN CHRISTIAN ACADEMY TEACHER RECOMMENDATION FORM

TEACHER INSTRUCTIONS

The child below is a candidate for admission to Wesleyan Christian Academy and has named you as an academic/ teacher reference. All 2nd - 12th-grade applicants are asked to submit three teacher recommendations: a Math teacher, an English teacher, and a third teacher of their choosing.

We thank you in advance for your professional insight into the academic and behavioral aspects of this student. Your feedback is an important part of our admission decision and will be kept confidential. If you have any questions, please contact the Admissions Office at (336) 819-6209.

Child's Name: _____

First Middle Last

Teacher's Name: _____

First Middle Last

Name of School: _____ **Date of Evaluation:** _____

Grade and Subject Taught: _____

How long have you known the student? _____ **No. of Years Teaching:** _____

Teacher's Phone: _____ **Teacher's Email:** _____

EMOTIONAL DEVELOPMENT

Student Characteristic	Superior	Good	Average	Below Average	Poor
Self-Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Positive Self-Image	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Sustain Attention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Admits Errors Willingly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you selected Below Average or Poor for any of the above, please explain:

SOCIAL DEVELOPMENT

Student Characteristic	Superior	Good	Average	Below Average	Poor
Respect for Adult Authority					
Ability to Work in Groups					
Relationship with Peers					
Leadership Qualities					
Concern for Others					
Sense of Humor					

If you selected Below Average or Poor for any of the above, please explain:

ACADEMIC DEVELOPMENT

Student Characteristic	Superior	Good	Average	Below Average	Poor
Ability to Apply Concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Think Creatively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Study Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you selected Below Average or Poor for any of the above, please explain:

ADDITIONAL QUESTIONS

Would you be glad to have this student in your classroom? Why or Why Not?

What words come to mind when you think about this student?

Has this student ever been expelled, suspended, or had disciplinary action imposed at school? Please explain.

Have the parents/guardians of this student been supportive of your school?

OVERALL RECOMMENDATION

Wesleyan Christian Academy’s mission is to partner with families by providing a biblically-based, college-preparatory education so that students will be equipped to serve Christ and influence the world around them for God’s glory. How strongly would you recommend this student for admission to Wesleyan Christian Academy?

Very Strongly	Strongly	Somewhat	With Hesitation	Not At All
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TEACHER SIGNATURE

I certify that the information provided in this reference is accurate to the best of my knowledge. I further understand that any information I provide will remain confidential and will not become part of the student’s academic record.

Teacher’s Name (Please print above this line)

Date Signed

Teacher’s Signature