



St. Thomas Aquinas School

4600 North Illinois, Indianapolis, IN 46208

(317) 255-6244 - Phone

(317) 255-6106 - Fax

CONFIDENTIAL Recommendation Form

Transfer Applicants: Grades: 1-4

Your comments will be held in the **strictest confidence** and are an important consideration in our admissions process. Thank you very much for your assistance.

Name of applicant: _____ Current grade: _____ Date: _____

Please circle the number that best applies in each category:

Academic Development		Weak	Fair	Good	Excellent	Exceptional
Reading:	Decoding skills	1	2	3	4	5
	Comprehension	1	2	3	4	5
Math:	Computation	1	2	3	4	5
	Conceptualization	1	2	3	4	5
	Problem-solving	1	2	3	4	5
Language:	Comprehension	1	2	3	4	5
	Follows directions	1	2	3	4	5
	Oral expression	1	2	3	4	5
	Written expression	1	2	3	4	5
	Vocabulary	1	2	3	4	5
Attention Span	1	2	3	4	5	
Motivation	1	2	3	4	5	
Study Habits	1	2	3	4	5	
Quality of work	1	2	3	4	5	
Contributions to group	1	2	3	4	5	
Achievement relative to potential	1	2	3	4	5	
Social/Emotional Development		Weak	Fair	Good	Excellent	Exceptional
Level of maturity		1	2	3	4	5
Relationship with peers		1	2	3	4	5
Relationship with adults		1	2	3	4	5
Relationship with parents		1	2	3	4	5
Consideration of others		1	2	3	4	5
Adaptability		1	2	3	4	5
Sense of humor		1	2	3	4	5
Curiosity		1	2	3	4	5
Imagination and creativity		1	2	3	4	5
Self-confidence		1	2	3	4	5
Conduct		1	2	3	4	5

What adjectives come to mind to describe this applicant? _____

Emotional development (self-image, acceptance of limits/routines, ability to make transitions, tolerance of frustration): _____

Social maturity (cooperation, respect for the rights of others, willingness to share, acceptance of constructive criticism): _____

Personal qualities (leadership, character, honesty, sense of humor, responsibility, concern for others: _____

Academic development: Please define areas of academic strength and weakness and comment on their nature and extent: _____

Special interests or talents: _____

Is the curriculum modified for this child? _____

What percentage of the child's grade is based upon homework assignments: _____

Parent cooperation and involvement: _____

To your knowledge, is the parents' perception of their child compatible with the school's understanding of the child? _____

Are there any aspects of the child's family life, physical or emotional history, or situations in your school of which we should be aware?:

In relation to boys and girls of the same age you have known, and using the scale below, how would you rate the candidate?

Personal Qualities	Weak	Fair	Good	Excellent	Exceptional
For Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For Character Attributes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Check here if any information pertaining to this child/family would be better communicated by phone. Please feel free to add further narrative on additional page if desired.

Form completed By: _____ Position: _____

School: _____

Should we need to follow-up, when is the best time to reach you? _____ Phone: _____

Signature: _____ Date: _____

This is a confidential recommendation form. If you would like to talk about this applicant in further detail, please contact the school principal @ 317-255-6244 and thank you for your response.

Please fax (317-255-6106) or mail this form to: **St. Thomas Aquinas School**
4600 North Illinois Street, Indianapolis IN 46208