



St. Thomas Aquinas School

4600 North Illinois, Indianapolis, IN 46208

(317) 255-6244 - Phone

(317) 255-6106 - Fax

CONFIDENTIAL Recommendation Form

Transfer Applicants: Grades: 5-8

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: _____

How long have you known the candidate and in what relationship? Please list subjects taught, including level of difficulty and grades earned by the applicant. Math teachers, please include the title of your text.

What are the first words that come to your mind in order to describe the applicant? _____

Please circle the number that best applies in each category:

Academic Qualities	Weak	Fair	Good	Excellent	Exceptional
Study habits and organization	1	2	3	4	5
Attention span	1	2	3	4	5
Motivation and drive	1	2	3	4	5
Intellectual aptitude	1	2	3	4	5
Critical and abstract thinking skills	1	2	3	4	5

What are the **academic strengths and weaknesses** of this candidate? Consider such categories as effort, curiosity, motivation, and achievement in relation to potential, class participation and homework preparation. Comments concerning writing ability, communication skills or other skills appropriate to your subject area will be helpful.

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

Personal Qualities	Weak	Fair	Good	Excellent	Exceptional
Personal conduct and integrity	1	2	3	4	5
Creativity	1	2	3	4	5
Reaction to suggestions/ criticism	1	2	3	4	5
Ability to relate with peers	1	2	3	4	5
Ability to relate with adults	1	2	3	4	5
Sense of humor	1	2	3	4	5

What are the personal strengths and weaknesses of this candidate? Consider such categories as character, honesty, self-confidence, maturity, responsibility, leadership, sense of humor, social skills and concern for others.

What are the candidate's extracurricular activities and abilities? _____

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**