



Grades 1-12 Recommendation Letter

Applicant's Name _____ For Grade _____ Year 20_____

The parent(s)/guardian(s) of the above named student have asked Mounds Park Academy to consider him or her for admission. Our goal is to ensure that each student we accept at Mounds Park Academy experiences success. As a core academic teacher, you have been asked to complete this form. Your assistance is essential in evaluating the applicant and, therefore, a completely candid and thorough evaluation will best serve the interests of the applicant, the applicant's family, and the school. **This information will be kept confidential.**

In what capacity have you known this applicant?

How long have you known this applicant?

What words would you use to describe this applicant?

Please comment on this applicant's academic strengths and opportunities for growth. Indicate interest, motivation, and study habits.

- Strengths:
- Opportunities for growth:

Please comment on the following characteristics for this applicant:

- honesty, sense of responsibility, potential for leadership, respect for authority, and emotional stability
- social relationships with peers, teachers, and other adults
- parental / guardian involvement

Character

To your knowledge, has this applicant ever been involved in a serious disciplinary incident?
Yes / No (*circle one*) If yes, please explain.

Is this applicant welcome to attend your school next year? Yes / No (*circle one*)

Please rank the characteristics which generally apply to this applicant.
(A = almost always observed, O = often observed, S = sometimes observed,
N = never observed, NA = not applicable)

- | | | |
|--|--|--|
| <input type="checkbox"/> respectful | <input type="checkbox"/> exercises leadership | <input type="checkbox"/> understands concepts |
| <input type="checkbox"/> manages time well | <input type="checkbox"/> cooperative | <input type="checkbox"/> participates in class |
| <input type="checkbox"/> self-confident | <input type="checkbox"/> works accurately | <input type="checkbox"/> well organized |
| <input type="checkbox"/> takes initiative | <input type="checkbox"/> involved in
extracurricular activities | <input type="checkbox"/> sought out by
classmates |

Have you ever recommended that this applicant have an educational, neurological or psychological evaluation? Yes / No (*circle one*) If yes, why?

If yes, to your knowledge was the evaluation completed? Yes / No (*circle one*)

All things considered, how would you rate the applicant?

Academically:

Socially:

- | | |
|---|--|
| <input type="checkbox"/> Superior (top 10%) | <input type="checkbox"/> Easily engages others |
| <input type="checkbox"/> Above Average (top 25%) | <input type="checkbox"/> Comfortable |
| <input type="checkbox"/> Average (top 50%) | <input type="checkbox"/> Needs Growth |
| <input type="checkbox"/> Below Average (bottom 50%) | |

Thank you for taking the time to complete this form!

Name _____ Email _____
(please print)

School Name _____ Work Phone (____) _____

Signature _____ Date _____

Please return to:
Mounds Park Academy • Office of Admission
2051 Larpenteur Avenue East
Maplewood, Minnesota 55109-4717
Phone: 651-748-5577 • Fax: 651-748-5534
Email: admission@moundsparkacademy.org