

Education Built on Faith, Knowledge and Virtue

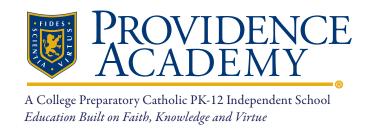
ADMISSIONS OFFICE 15100 Schmidt Lake Road Plymouth, MN 55446 Phone: 763-258-2502 Fax: 763-258-2503

info@providenceacademy.org providenceacademy.org/admissions

Teacher Referral (for candidates entering grades PK-5)

(Applicant) is applying to enter grade at Providence Academy. Consideration of evaluations from current teachers is a vital part of our admission process. We appreciate your time and consideration you put into this evaluation and understand the challenge in evaluating children as they are growing, changing, and developing. Please be candid in your responses. All teacher referrals are confidential and do not become part of the student's permanent file, nor are they shared with applicants or their parents/guardians. Providence Academy is a private, independent Catholic PK-12 college preparatory school. The Academy seeks students eager to prepare for and engage an academically challenging curriculum.								
Teacher Name:		Subjec	t Area(s) Taught:					
How long and in what capacity	y have you know	n this student	?					
In relation to other students in	the applicant's	grade, please r	ate the student in the	e following are	as:			
Enthusiasm for Learning Takes Initiative Class Participation Respect for Teachers Expresses Own Ideas Works Neatly Follows Directions Stays on Task Interactions with Peers Accepts Limits Emotional Stability Creativity Maturity/Personal Integrity Ability to Work in Groups Ability for Independent Work Attention Span Completes Work On Time Vocabulary Physical Self-Control Expresses Needs Appropriately Adaptibility/Flexibility Self-confidence			Above Average	Average	Below Average	No Basis		
Additional Info. for Pre-K and Fine Motor Coordination Gross Motor Development Letter Recognition Recognizes Sight Words Number Recognition Speech Development Extends Simple Patterns Uses Scissors/Utensils Properly Memory for Information Counts Using 1:1 Corresponde		Candidates:	0 0 0 0 0 0					

(over for additional items)



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Please comment on the following:			
Academic, behavioral, and persona	al strengths		
Academic, behavioral, and persona	al challenges		
Child's social/emotional develop	oment		
Overall behavior in the classroon	n-		
Has the applicant been recomme	ended for an assessment (e.g. speech and lan	guage, occupational th	erapy)?
List any special programs or supp	port services the applicant receives during or	outside of school, if an	ıy.
Describe parental involvement, c	cooperation, expectations:		
Please add any additional comme	ents that would give us a more complete pict	ture of the applicant as	a student in your class.
Your Name	Position at School _		
School Name	School Phone		
School Address	City	State	Zip
Date:Would yo	ou prefer we contact you directly for further	information? □Yes	П№
Email address	Direct Line		

Please return this form to the Director of Admissions at the address listed below. Thank you again for your attention on behalf of this student.