



FOOTHILL
CHRISTIAN SCHOOL

Junior High Recommendation

Name of Applicant _____ Applying for Grade _____

The above named applicant is applying for admission to our school. This evaluation can be completed by a principal, teacher, or a pastor. Pastors only need to complete sections A & C. The evaluation will be used by persons on the Admissions Committee and will not become part of the student's cumulative folder; therefore, this form will not be open to general review. Thank you for your time in preparing this evaluation.

School / Church _____ Date Student Enrolled _____

A. Student Character

In relation to other students in the applicant's age group, please check the appropriate box for each item below.

Student Rating	Excellent	Good	Average	Poor
Motivation: Committed to learning; attentive to goals; inclined to complete tasks; works beyond minimal expectations				
Sense of Responsibility: Concerned with welfare and rights of others; respects other's and school's property; follows school rules and regulations				
Personal Relationships: Works well in groups; liked by students/adults; relates to peers and adults in a respectful manner				
Initiative and Leadership: Often called upon to lead group activities; voluntarily participates in class and co-curricular activities				
Cooperation				
General Conduct/Effort				
Work and Study Habits				

Comments on the above area(s): _____

B. Academic Performance

Attendance at school: Number of absences _____ Number of tardies _____

1. If this student is in any advanced sections or programs in your school, please explain _____

2. In which areas do you feel this student needs improvement? _____

3. Has the student been recognized for any outstanding academic, athletic, and/or artistic performances?

4. Has this student been assigned to an IEP or remedial services? _____ Yes _____ No

5. Has the student been subjected to any serious disciplinary procedures (i.e., suspension, expulsion etc.)
 _____ Yes _____ No Explain _____

6. Is there any additional information that you think might or should influence our decision about this student?

C. Recommendation:

- | | Academically | As a Person |
|--|--------------|-------------|
| 1. I strongly recommend this student | _____ | _____ |
| 2. I recommend this student | _____ | _____ |
| 3. I recommend with reservations _____
(Please state your reservations) | | |
| 4. I do not recommend this student _____
(Please state your reservations) | | |

Name: _____ **Position:** _____
 (printed)

Signature _____

Relationship to student: _____

School/Church Name _____

School/Church Address _____ **Phone ()** _____

City _____ **Zip** _____

Please return directly to Foothill Christian School
Attention: Admissions by mail, email (sesquivel@foothillchristian.org) or fax
 242 W. Baseline Rd., Glendora, CA 91740
 Phone: 626.914.1849 Fax: 626.914.5940