

Griffin Christian Academy
2000 W. McIntosh Rd.
Griffin, GA 30223
770-228-2711

Application for Admission: Teacher Recommendation (entering grades 1-8)

Name of Applicant _____

Present School _____ Present Grade _____

To Recommender: The student named above is an applicant for admission to Griffin Christian Academy. In order to give the candidate a full review, we ask that you provide us with the following information. This form must be returned in a sealed envelope and will remain confidential. Thank you, in advance, for your cooperation.

Recommender's Name _____ Position _____

School _____ Telephone _____

Street Address _____ City _____ State _____ Zip _____

How long and in what capacity have you known the student? _____

Has the student performed academically in relation to his/her potential? _____

Please describe the student's conduct and peer relationships. _____

Please indicate any activities, school and community, in which you know the applicant participated with distinction. _____

How would you describe the parents' involvement with their child's education and with the school? _____

Please rate the applicant in the categories listed below:

	<u>Above Average</u>	<u>Average</u>	<u>Below Average</u>
Maintains self-control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is attentive in class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperates with teacher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperates in a group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows school dress code	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is courteous to other students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes care of personal property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shows respect to teachers and students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is honest about his/her mistakes or wrongdoing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Christian Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Turns in homework, requested forms, etc. on time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organizational Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Daily Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I recommend this applicant for admission to Griffin Christian Academy:

Without Reservation

With Reservation

Do Not Recommend

Please attach an explanation of any "below average" markings and / or any additional comments with reference to the academic potential, personality, social awareness, and Christian character of the student.

Signed _____ Date _____ Telephone (optional) _____