

Name of Applicant _____

Present School _____ Present Grade _____

RECOMMENDATION

The student named above is an applicant for admission to First Assembly Christian School. In order to give the candidate a full review, we ask that you provide us with the following information. Please return this form directly to First Assembly Christian School by email, fax or mail (contact information at bottom). Thank you in advance for your cooperation.

Name of Recommender _____

Academic Subjects Taught _____

School _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

1. How long and in what capacity have you known the applicant? _____

2. How did the student perform academically in relation to his/her potential? _____

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

Please rate the applicant in the categories listed below (asterisked items not applicable for JrK/SrK):

	Outstanding	Excellent	Average	Below Average
ACADEMIC INITIATIVE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WRITTEN EXPRESSION*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ORAL EXPRESSION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ORGANIZATIONAL SKILLS*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DAILY PREPARATION*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CREATIVITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LEADERSHIP*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SENSE OF HUMOR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ENTHUSIASM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHRISTIAN CHARACTER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CONCERN FOR OTHERS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EMOTIONAL MATURITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CLASSROOM BEHAVIOR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall, how do you recommend this applicant for admission?

	Highly	Without Hesitation	With Hesitation	Do Not Recommend
ACADEMIC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PERSONAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CONDUCT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please provide additional comments on the back with reference to the academic potential, social awareness, and Christian character of the applicant. Also, please explain categories rated below average.

Signed _____

Date _____

PLEASE RETURN TO: First Assembly Christian School
 8650 Walnut Grove Rd
 Cordova, TN 38018
 (901) 458-5543 Office
 (901) 324-3558 Fax
 ellen@facsmemphis.org

