



# Teacher Recommendation of Prospective Student Applying at St. Louise School to **KINDERGARTEN**

## **SAINT LOUISE PARISH SCHOOL**

133 – 156<sup>TH</sup> Avenue SE Bellevue, WA 98007  
425-746-4220 (FAX 425-644-3294)

*Dear Teacher,*

\_\_\_\_\_ has applied for admission to kindergarten at St. Louise School. Kindly fill out this form and return it to the applying family or to St. Louise School in the attached return envelope (or by fax) as soon as possible. Thank you for your assistance.

Teacher completing recommendation form: \_\_\_\_\_

How long have you known this student and in what capacity?

\_\_\_\_\_

What are the first words that come to mind to describe this student?

\_\_\_\_\_

\_\_\_\_\_

Compared to other students you have taught at this grade level, please rate this student by marking the appropriate column for each category and adding any comments:

	Out-standing	Above Average	Average	Below Average	No Basis	Comments
Separates Easily from Parents						
Follows Directions & Listens Attentively						
Ability to Read & Write Numbers						
Ability to Read & Write Letters						
Large Motor Skills						
Fine Motor Skills						
Ability to Work Cooperatively						
Peer Relationships						
Self Confidence						
Takes Responsibility for Actions						
Parents' Involvement & Cooperation						

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