

SCHOOL ADMINISTRATOR

Pope John Paul II Catholic High School Recommendation Form

Parent: Please complete the top portion of this form and forward to your son's/daughter's current school for completion by his/her School Administrator.

APPLYING FOR GRADE: _____

NAME OF STUDENT: _____

My son/daughter, _____, has applied to Pope John Paul II Catholic High School for admission. I ask that you provide the information requested and forward it directly to JPII CHS. I hereby waive my right of access to this document as well as my son's/daughter's right. I understand it will not be forwarded to other institutions without my prior approval.

PARENT SIGNATURE: _____ **DATE:** _____

SCHOOL ADMINISTRATOR: We appreciate your cooperation in completing this form. Your insights help us to better understand a student's ability to be successful at our school. This form should allow us to effectively evaluate a student's past academic achievement, work ethic and conduct as documented on his/her report card. Your evaluation of this student is considered confidential and will not be discussed with the student or his/her family.

Compared to other students of the same grade level, please rate the applicant regarding the following characteristics: (check appropriate box)

	Outstanding	Average	Poor	Not Observed
Maturity level.....				
Respect for Authority.....				
Interaction with peers.....				
Self-discipline.....				
Integrity.....				
Conduct.....				

Has the student presented any discipline problems? Yes No

Has the student been suspended? (last 3 years) Yes No

Has the student been on academic probation or similar action? Yes No

Are you aware of any learning disabilities? Yes No

If any of the above is yes, please explain: _____

This applicant is: (check one) Strongly Recommended Recommended Recommended with Reservation Not Recommended

Please use the space on the back of this form to make additional comments, if necessary.

Thank you for the accuracy of the information you have provided. In the course of some interviews, it may be necessary for us to refer to disciplinary issues indicated. We will protect the anonymity of the teacher, counselor or administrator.

Administrator's Printed Name and Title: _____ **Date:** _____

Signature: _____ **School Telephone:** _____

School Name/Address: _____

Please return this form to the Admissions Office