Math Teacher Recommendation Form



Student's Nome											
Student's Name:											
Phone number: ()											
Address:											
City:		State:		Zip Code:	:						
Present School's Name:						Grade:					
If you feel th				vell enough, please vith the student. Ple		this form to another s eturn this form to:	taff member who				
	-	-				elvidere Rd., Waukeg					
						use only by appropri come part of any perr					
STUDENT I						1 21					
Academic Achievement:		□Below Expectations		□Average		Good	□Outstanding				
Critical Thinking:		Limited		□Fair		□Frequently Perceptive	Exceptionally Perceptive				
Study Habits:		Poor		□Fair		Good	□Excellent				
Work Ethic:		□ Limited		□Sporadic		□Good	□Exceptional				
Leadership Potential:		Does not seek leadership roles		Leads when given responsibil	•	Seeks opportunities (uses them well)	□Natural Leader				
Classroom Conduct:		Frequent Disruptions		□Occasional Misconduct		Good Behavior	□Role model				
Integrity:		Questionable		□Usually Trustworthy		□Trustworthy	Trust Implicitly				
Consideration of Others:		□Rarely Considerate		□Usually Considerate		Considerate	□Extremely				
Social Interaction: (Peers)		□Poor		□Occasional problem		Consistently relates well	□ Outstanding				
Academically: (check one)	□I strongly recommend		I recommend this student		rese	Recommend with rvations ase explain)	Do not recommend (please explain)				
Personally: (check one)	□I strongly re	ecommend	□I re studer	commend this nt	rese	Recommend with rvations ase explain)	Do not recommend (please explain)				



Written comments are extremely helpful. Please give any additional information which you think should influence our decision.

Is this a full- year Algebra I or Geometry class?	U Yes	🗖 No	
---	--------------	------	--

Math Teacher Signature: _____

_____Date: ______

Please mail completed forms to the address listed below:

Ms. Noemi G. Cuesta, Director of Admissions. 3106 Belvidere Rd., Waukegan, IL 60085 Phone: 224. 215. 9400 Fax: 224.219.9737