



# Eagle's View Academy

## Admissions Recommendation Form

### Grades 2-6

**Instructions:** This form should be completed by the student's most recent teacher. Once completed, the form should be mailed by the student's school to Eagle's View Academy, Office of Admissions, 7788 Ramona Boulevard West, Jacksonville, Florida, 32221. It may also be faxed from the school to Eagle's View Academy at 904-786-1445. Questions may be directed to the front office at 904-786-1411.

**Authorization (to be completed by Parent/Guardian):** I authorize the release of school records, including report cards for all grades for the past two years, standardized test scores, and disciplinary records to Eagle's View Academy for the following student:

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Current School \_\_\_\_\_ Current Grade Level \_\_\_\_\_

I also acknowledge that I waive my right to read this confidential recommendation.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Recommender:** We appreciate your cooperation in completing this form. It provides one way of getting to know the child and is reviewed with the full awareness that children are constantly changing and developing. This evaluation will be kept in strict confidence and will be reviewed by only the admission committee and will not become part of the student's permanent record. When you have completed it, please mail, or fax to Eagle's View Academy. We appreciate your candid and honest evaluation of this student.

Recommender Name \_\_\_\_\_ Title/Position \_\_\_\_\_

School Name \_\_\_\_\_

Length of time you have known the student \_\_\_\_\_

Is the student in good standing at your school? If not, please explain \_\_\_\_\_

Has the student ever been suspended or placed on disciplinary probation while enrolled in your school? If yes, please explain \_\_\_\_\_

Would this student be permitted to re-enroll in your school next year? If not, please explain \_\_\_\_\_

Attendance Record: Please select the rating as it applies to the student.

- |                      |       |              |            |                      |
|----------------------|-------|--------------|------------|----------------------|
| 1. On time to school | Never | Rarely       | Usually    | Always               |
| 2. On time to class  | Never | Rarely       | Usually    | Always               |
| 3. Absent            | Never | Occasionally | Frequently | Exceeds allowed days |

Please indicate number of days: Tardy \_\_\_\_\_ Checked out \_\_\_\_\_ Absent \_\_\_\_\_

#### Academic Needs:

Does the student have an IEP? \_\_\_\_\_ If so, for what area of exceptionality?

\_\_\_\_\_

Does the student have a 504 Plan? \_\_\_\_\_ If so, for what condition?

Please comment on this student's ability to meet the academic and behavioral expectations of your school. Have you adjusted your program to accommodate the needs or abilities of this student?

**Social/Emotional Development** (please circle best descriptor):

Demonstrates sense of Integrity and responsibility	Very honest and trustworthy	Fairly Reliable	Occasional Issues	Cheats Frequently
Social relationships with peers	Very mature	Average	Somewhat immature	Relates poorly
Emotional maturity	Very mature	Average	Somewhat immature	Very immature
Consideration for others	Very considerate	Usually considerate	inconsiderate	unkind
Self-control	Excellent	Good	Occasionally disruptive	Frequently disruptive
Interaction with teachers/adults	Healthy/comfortable	Polite	Uneasy	Poor
Attitude	Positive/Upbeat	Mostly pleasant	Fluctuates	Negative
Work Ethic	Strong	Good	Inconsistent	Poor

**Academic Development** (please mark the column that applies):

	Consistently	Usually	Occasionally	Seldom	No basis for judgment
Listens Attentively					
Follows Directions					
Contributes to Class Discussions					
Works well independently					
Organizes self/materials					
Works well in small groups					
Seeks help when needed					
Responds positively to suggestions/requests					
Completes homework on time					
Moves easily from one activity or space to another					

**Academic Performance** (please mark the column that applies):

	Outstanding	Above Average	Average	Below Average	No basis for judgment
Reading Fluency					
Reading Comprehension					
Grammar					
Handwriting					
Problem Solving Skills					

Computation Skills					
Number Sense					

**Parent and Family Information** (please mark the column that applies):

Has/have the parent(s) of this student been:	Consistently	Usually	Occasionally	Seldom
Supportive of the school's policies				
Responsive to suggestions/guidance				
Respectful of the staff/teachers/ administration				
Supportive of the school's disciplinary expectations and procedures				

I recommend this student:    **Enthusiastically**            **Strongly**            **With Reservation**            **Not Recommended**

Please feel free to include any additional information such as commendations, accomplishments, or outside support/enrichment that will offer a more complete picture of this applicant. You may use the space provided below. If you would prefer to discuss this applicant by phone, please let us know a convenient time to call.

Daytime \_\_\_\_\_ Evening \_\_\_\_\_ Best time to call \_\_\_\_\_

**Additional Comments:**

---



---



---



---



---



---



---



---

Signature \_\_\_\_\_

Email \_\_\_\_\_ Date \_\_\_\_\_

School Telephone Number \_\_\_\_\_