



## Teacher Recommendation

**To the Parent or Guardian:** Please sign this form before giving it to the applicant's teacher or counselor.

\_\_\_\_\_ (Student's Name) has applied for admission to Chesapeake Bay Academy. Please complete the requested information and return this form directly to **Chesapeake Bay Academy, 821 Baker Road, Virginia Beach, VA. 23462**. I release you from liability that may occur as a result of this appraisal and I waive my rights to access.

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

**To the Teacher/School Administrator:** Please complete this form as accurately as possible in relation to others in the candidate's age group. Leave blank if comment is not applicable. Please know that the professional comments you share are held in **Strictest Confidence**, and do not become a part of the students permanent record. Thank you in advance for the help your comments will provide.

	Below Average				Above Average
<b>Academic Development</b>					
Reading Achievement	1	2	3	4	5
Math Achievement	1	2	3	4	5
Academic Promise	1	2	3	4	5
Academic Achievement	1	2	3	4	5

<b>Personal Development</b>					
Social Relationship with Peers	1	2	3	4	5
Works in a Group	1	2	3	4	5
Works Independently	1	2	3	4	5
Organization of Time and Work	1	2	3	4	5
Attention Span	1	2	3	4	5
Emotional Maturity	1	2	3	4	5
Accepts Change Easily	1	2	3	4	5
Expresses Ideas Orally	1	2	3	4	5
Intellectual Curiosity	1	2	3	4	5
Self Motivation	1	2	3	4	5
Attendance	1	2	3	4	5

**General Comments:**

How would you describe this student's attitude towards learning?

What do you feel are his/her areas of strengths and weaknesses?

Does the student exhibit any behavior problems? If so, please describe.

How does this student receive guidance or correction?

Describe this student's relationships with his/her peers?

What classroom management techniques have you found to be successful with this student?

Are you aware of any medical situation (i.e. medications, physical impairments, etc.) that may reflect on the student's learning?

How supportive are the parents?

Does his/her attendance pattern play a role in the social or academic adjustment? If so, why?

Please comment on any pertinent aspect not covered by the categories above.

Thank you for completing this evaluation. Your cooperation is greatly appreciated.

Signature	Date
Printed Name	Title
Subject Taught	
Name of School	Telephone

