

# SSSAS RECOMMENDATION FORM

## ENTERING GRADES 2-5

**Return Address:** SSSAS Admission Office, 400 Fontaine Street, Alexandria, Virginia 22302

Please print and return completed form no later than January 12, 2012.

**For parents:** I hereby waive my right to access this recommendation and authorize the above-named person to provide an evaluation and all relevant information to the school for purposes of my child's application to attend the school.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Applying for Grade \_\_\_\_\_

**For persons submitting recommendation:** The School would appreciate your candid assessment of the applicant's abilities. Your recommendation will be kept confidential.

Current School \_\_\_\_\_ I have known this student for \_\_\_\_\_ months/years.

Classroom Teacher or School Director: \_\_\_\_\_ Grade/Course Taught \_\_\_\_\_

Texts used \_\_\_\_\_

**Purpose:** We appreciate your cooperation in completing this form. Please be candid about this student's academic ability and motivation. We understand the difficulty in evaluating a student and are fully aware that children are constantly growing, changing and developing. This form is only one piece of the student's profile to be used in our assessment process, and it will not become a part of the student's permanent record. Thank you for your thoughtful attention to this request.

CHARACTER AND PERSONALITY TRAITS	Advanced for Age	Appropriate for Age	Needs Development	Not at Acceptable Level	Comments
Conduct					
Leadership					
Emotional maturity/stability					
Social relationship with peers					
Self-confidence					
Integrity					
Sense of humor					
Sense of responsibility					
Interaction with teachers/adults					
Participation in life of the school					
Creativity					
Respect for others					
Concern for others					
ACADEMIC TRAITS	Advanced for Age	Appropriate for Age	Needs Development	Not at Acceptable Level	Comments
Academic potential					
Academic achievement					
Self-motivation					
Effort/initiative					
Study habits/organization of work					
Intellectual curiosity					
Attention span					
Commitment to homework					
Ability to follow directions					
Ability to work independently					
Ability to work in a group					
Ability to express ideas orally					
Ability to express ideas in writing					
Attendance					
Participation in class					

**What are the first words that come to mind when describing this student?**

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**Please circle the words that you feel describe this student:**

aggressive	confident	follower	irritable	over-protected	self-centered
anxious	conscientious	happy	manipulative	passive-resistant	self-disciplined
articulate	disobedient	helpful	motivated	perfectionist	shy
cheerful	honest	negative leader	positive leader	easily discouraged	
social	influential	organized	responsible	well-liked	

**What frustrates this student?** \_\_\_\_\_

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**Comments:** We would appreciate additional comments and observations concerning this student's abilities, attendance, personal qualities, and special interests. We welcome any other information you think might be helpful in our understanding of this student.

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**Parental cooperation and involvement with the school** (please describe): \_\_\_\_\_

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**Submitted by** \_\_\_\_\_ **Date** \_\_\_\_\_

**Phone number where we may reach you** (\_\_\_\_\_) \_\_\_\_\_ **Email** \_\_\_\_\_