

## TEACHER RECOMMENDATION FORM 2020-2021

**Students Full Name:** \_\_\_\_\_

The above named candidate is being considered for STEM Academy Enrollment. STEM Admission Committee will use this form to determine if he/she meets the STEM Academy high standards of service, leadership, and excellence. Please complete the survey to the best of your ability. If you have questions or comments, please contact Ms. Awilda Torres-Aponte ([EOSTEMadmissions@gmail.com](mailto:EOSTEMadmissions@gmail.com)). **Please submit this form at your earliest convenience.**

**Teacher completing form:** \_\_\_\_\_ **Phone/Email:** \_\_\_\_\_

**Subject Matter:** \_\_\_\_\_ **Years Known:** \_\_\_\_\_

**Grade Student Currently has in your class:** \_\_\_A \_\_\_B \_\_\_C \_\_\_D \_\_\_ F

Please rate the student using the scale provided. For responses of 2 or lower, please comment.	1= Poor 3=Average 5=Excellent
<b>Attitude (Academically and Socially)</b>	
<b>Ability to Grasp Concepts</b>	
<b>Attendance</b>	
<b>Social Skills</b>	
<b>Initiative</b>	
<b>Ability to keep commitments/meet deadlines</b>	
<b>Punctuality</b>	
<b>Leadership Potential</b>	
<b>Behavior/Disciplinary Records (as per your class)/Maturity</b>	

Do you wish to elaborate on any of these ratings?

\_\_\_\_\_

Please offer any additional comments concerning this student's ability, character and suitability for admission to STEM Academy. \_\_\_\_\_

\_\_\_\_\_

**Overall impression of candidate: (Pick one)** \_\_\_ Highly recommend \_\_\_ Recommend

\_\_\_ Recommend with reservation \_\_\_ Do not recommend

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_