



# Maur Hill – Mount Academy

Admission Office  
 1000 Green Street  
 Atchison, KS 66002  
 Telephone: 913-367-5482  
 admissions@mh-ma.com

## Teacher Recommendation Form

### Student Information:

Name: \_\_\_\_\_

Applying for grade: \_\_\_\_\_

Parent(s): \_\_\_\_\_

Phone: \_\_\_\_\_

**Please submit this form to the appropriate person at your school.**

### Person Completing Form

The above named applicant has applied to Maur Hill - Mount Academy and has given your name as a reference. Please indicate your opinions of this student in respect to any of the following areas in which you feel qualified to judge from your observation, records, and personal experience. Your communications will remain confidential. Please contact the MH-MA Admission Office with any questions. Thank you for your assistance.

Name: \_\_\_\_\_

Title/Position: \_\_\_\_\_

School: \_\_\_\_\_

In what years did you teach the student: \_\_\_\_\_ How large is the class? \_\_\_\_\_

How well does the student accept advice or criticism?

Check any words that describe the student's general make-up. Use open boxes for own words.

<input type="checkbox"/>	Persevering	<input type="checkbox"/>	Jealous	<input type="checkbox"/>	Irritable
<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Talented	<input type="checkbox"/>	Anxious
<input type="checkbox"/>	Patient	<input type="checkbox"/>	Self-confident	<input type="checkbox"/>	Nervous
<input type="checkbox"/>	Stubborn	<input type="checkbox"/>	Quick tempered	<input type="checkbox"/>	Easily exhausted
<input type="checkbox"/>	Capable	<input type="checkbox"/>	Cynical	<input type="checkbox"/>	Unhappy
<input type="checkbox"/>	Tolerant	<input type="checkbox"/>	Tactful	<input type="checkbox"/>	Periods of gloom or depression
<input type="checkbox"/>	Calm	<input type="checkbox"/>	Conscientious	<input type="checkbox"/>	Frequent day-dreaming
<input type="checkbox"/>	Impetuous	<input type="checkbox"/>	Cheerful	<input type="checkbox"/>	Poor health
<input type="checkbox"/>	Pessimistic	<input type="checkbox"/>	Submissive	<input type="checkbox"/>	
<input type="checkbox"/>	Bashful	<input type="checkbox"/>	Excited	<input type="checkbox"/>	

	Outstanding	Above Average	Average	Below Average	Don't Know
Academic Potential					
Academic Achievement					
Intellectual Curiosity					
Effort/Determination					
Ability to Work Independently					
Organization					
Creativity					
Honesty/Integrity					
Self-esteem					
Responsibility					
Emotional Stability					
Leadership Ability					
Attendance					
Extracurricular Activities					

I recommend this student be admitted to Maur Hill – Mount Academy:

Enthusiastically: \_\_\_\_\_ Confidently: \_\_\_\_\_ With Reservation: \_\_\_\_\_ Do Not: \_\_\_\_\_

Please feel free to write any additional comments pertaining to this student.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Thank you for your time and consideration. Please forward this form to the Admission Office at Maur Hill - Mount Academy.**

<p>Mail:</p> <p>Maur Hill - Mount Academy  c/o Admission Office  1000 Green St.  Atchison, KS 66002</p>	<p>Email:</p> <p>Maur Hill – Mount Academy  Admission Office  admissions@mh-ma.com</p>
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