



MONTESSORI  
School of Denver

## Confidential Recommendation - English Teacher

**To the Parent/Guardian:** Please type or print your name and give this form to your current school's office. The school is welcome to email [tgehrke@msd-co.org](mailto:tgehrke@msd-co.org), fax 303-757-6145, or mail the record to Montessori School of Denver (1460 S. Holly St, Denver, CO 80222).

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
Applying to Grade

\_\_\_\_\_  
Name of Current School

**To the Parent:** *Please read and sign the statement below.*

For the student named above, I authorize the release of school records, including an official transcript of all grades for the past two years as well as the results of academic testing. I acknowledge that I waive my right to read the confidential teacher recommendations and the school report.

\_\_\_\_\_  
Signature of Applicant's Parent or Guardian

\_\_\_\_\_  
Date

**To the Teacher:** This information will only be reviewed by Montessori School of Denver's Admission Committee. It will not be shared with the student's parents, and will not become part of the student's permanent record. Thank you for your cooperation and candor.

<b>Academic Qualities</b>	<b>NO OPPORTUNITY TO OBSERVE</b>	<b>POOR</b>	<b>FAIR</b>	<b>AVERAGE</b>	<b>GOOD</b>	<b>EXCELLENT</b>	<b>EXCEPTIONAL</b>
Study habits							
Attention span							
Ability to work independently							
Ability to organize and communicate ideas							
Motivation							
Intellectual curiosity							
Critical and abstract thinking skills							
Classroom participation							
<b>Personal Qualities</b>	<b>NO OPPORTUNITY TO OBSERVE</b>	<b>POOR</b>	<b>FAIR</b>	<b>AVERAGE</b>	<b>GOOD</b>	<b>EXCELLENT</b>	<b>EXCEPTIONAL</b>
Relationship with peers							
Relationship with adults							
Creativity							
Self-confidence							
Leadership potential							
Reaction to setbacks							
Concern for others							
Conduct							
Integrity							
Ability to act independently							
Ability to work cooperatively							
General level of maturity							
Sense of humor							

# CURRENT ENGLISH TEACHER RECOMMENDATION FORM

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1. Please compare this student's academic achievement to his/her ability.
2. How many students are in this class? \_\_\_\_\_
3. Comment on this student's reading comprehension. Please list books read this year. You may add a sheet if necessary.  
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4. In this student's academic work, does he/she require prodding or additional supervision? Please elaborate.
5. Comment on the student as a person. (Consider maturity, integrity, behavior, relationship with peers, self-confidence, etc.)
6. What has your experience been in working with this student's family?
7. Is there any additional information that can be better conveyed in a phone conversation?  
Yes No If necessary, hours and phone number where you can be reached:

\_\_\_\_\_

_____ Name	_____ Position
_____ School	_____ School phone
_____ School Address	_____ Teacher E-mail
_____ Signature	_____ Date

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I RECOMMEND THIS STUDENT	NOT AT ALL	WITH RESERVATION	MILDLY	WITH CONFIDENCE	ENTHUSIASTICALLY
Academic ability and promise					
Character and personal promise					
Overall					