

Sunrise Beach High School

1601 North Street SE Olympia, WA 98501
(360) 791-9348 / info@sunrisebeachschool.org

TEACHER - LETTER OF RECOMMENDATION

Name of Applicant: _____

Teacher: _____

Date: _____

PARENT/GUARDIAN: To help us make an informed and prayerful selection and placement of your child, it is important to learn more about him or her. Please give this recommendation form to a teacher at a school, who is familiar with your child.

PERSON FILING RECOMMENDATION: Thank you for the time and effort required to respond to this inquiry about the applicant. Your candid answers will help us determine selection and placement of the applicant. Please answer these questions to the best of your knowledge.

1. How long have you known this applicant?
2. In what capacity to you know this applicant?
3. Has the applicant ever been suspended/expelled from school? Yes__ No__ Don't know__
4. Has the applicant ever used drugs, alcohol, or tobacco? Yes__ No__ Don't know__
5. Please describe the applicant as a student. (Please consider in your answer areas such as study habits, motivation, initiative, scholastic achievement, etc.).

6. Describe the applicant as a person. (Please consider relational skills with peers and adults, self-confidence, behavior, activities outside of school, etc.).

7. What are the student’s major character and personality strengths?

8. List the student’s character or personality weaknesses. Explain.

9. Would you recommend this applicant for enrollment at Sunrise Beach High School, a private Christian school? Why?

	Yes	Usually	Sometimes	No
Completes work on time				
Is honest				
Is respectful to others.				
Accepts criticism				
Shows self-control				
Is neat/organized				
Works hard				
Follows directions				
Is courteous				
Is obedient to authority				
Is self-disciplined				
Is healthy				
Is a leader				

