



TEACHER REFERENCE FORM 1st—8th Grade Applicants

THIS SECTION TO BE COMPLETED BY PARENT OR GUARDIAN

For Parents: My child, _____ has applied for admission to Immanuel Christian School to enter _____ grade for the 20__ - 20__ school year.

I authorize the person named below or other appropriate school professional to provide an evaluation and all relevant information to Immanuel Christian School for purposes of my child's application. As part of the admissions process, the homeroom or core subject teacher should complete this form and provide any additional comments which will help to make an accurate assessment and placement of this student.

Name of Teacher: _____ **Position:** _____

Name of School: _____ **Dates of Attendance:** _____

Required Parent Signature: _____ **Date:** _____

If submitting electronically, please type your initials above to serve as your signature.

I hereby waive my right to view this recommendation in the future.

Parent Signature: _____ **Date:** _____

If submitting electronically, please type your initials above to serve as your signature.

THIS SECTION TO BE COMPLETED BY THE HOMEROOM OR CORE SUBJECT TEACHER

Please complete this form along with any additional comments to make an accurate assessment of this student. If the parent has signed the waiver above, your recommendation will be kept confidential.

I have known this student for _____ year(s). I am his/her _____ teacher.

Check all words which describe this applicant:

Aggressive	Anxious	Cheerful	Disoriented	Easily Distracted
Passive-resistant	Responsible	Over-protected	Shy	Social
Influential	Manipulative	Organized	Resourceful	Self-centered
Negative leader	Follower	Perfectionist	Irritable	Vivacious
Conscientious	Self-disciplined	Confident	Honest	Easily discouraged
Well-liked	Helpful	Leader	Respectful	Courteous to peers

Choose one for each category:

CATEGORY	PERSONAL QUALITIES			
Maturity in terms of age and grade	Very mature	Usually considerate	Somewhat immature	Overplaced
Consideration of others	Unusually thoughtful	Usually considerate	Sometimes inconsiderate	Inconsiderate
Social adjustment with peers	Healthy relationships	Chooses to have a few friends	Occasional problems	Relates poorly
Stability	Stable	Somewhat stable	Seeks much attention	Easily frustrated
Sense of humor	Delightful	Good	Average	Rarely laughs or smiles
Self-confidence	Healthy self image	Needs some support	Needs much reassurance	Appears overly confident
Integrity	Honest	Usually trustworthy	Occasionally dishonest	Untrustworthy
Conduct	Well-behaved	Usually well-behaved	Sometimes misbehaves	Unruly
Health of applicant	Excellent	Seldom sick	Occasionally sick	Frequent absences
Attitude of parents	Cooperative	Indifferent	Overly protective	Antagonistic

Choose one for each category:

CATEGORY	ACADEMIC QUALITIES			
	Outstanding	Good	Average	Limited
Academic potential	Outstanding	Good	Average	Limited
Achievement in classroom work	Far above expectations	Better than paperwork shows	As expected	Below expectations
Self-motivation	Looks for ways to learn	Some desire to learn	Does what is required	Does very little
Effort	Maximum	Usually good	Sporadic	Occasional
Study habits	Well organized	Usually completes assignments on time	Easily distracted	Poor habits
Intellectual curiosity	Strong and varied	Interested in just one area	Occasional spark of interest in a few areas	Not usually motivated
Ability to work in a group	Always works well	Usually is cooperative	Sometimes unable to cope	Has great difficulty in a group
Ability to work independently	Always works well	Needs help occasionally	Needs help frequently	Supervision is needed most of the time
Participation in discussions	Voluntarily joins in	Participates occasionally	Contributes only when called upon	Rarely contributes relevant information
Reads for pleasure	Constantly	Frequently	Occasionally, when prodded	Rarely
Ability to write	Excellent mechanics	Good mechanics	Fair mechanics	Poor mechanics
Ability to creatively write	Excellent ideas	Good ideas	Fair ideas	Scattered ideas
Ability to express ideas orally	Exceptional	Good	Has some difficulty	Limited
Follows directions	Quickly and correctly	When needed asks and understands	Periodically needs help	Needs an explanation most of the time
Attention span	Exceptional	Usually good	Occasionally distracted	Easily distracted
Response to academic challenges	Finds a solution	Tries to find a solution	Seldom will respond positively	Never tries
Self-regulates	Always	Usually	Occasionally	Never

Has the applicant been evaluated or is he/she in the process of being evaluated for any physical, emotional or academic reasons?
 Yes No If yes, what is the nature of the difficulty?

To your knowledge, is the applicant on medication or previously been on medication? Yes No If yes, what kind (if known)?

Have you observed any signs of learning disabilities? Yes No If yes, specifically what signs?

Has the applicant ever been the subject of major disciplinary action? Yes No If yes, please explain.

What are the applicant's special interests?

Please feel free to include any additional information on a separate sheet which might be helpful in our evaluation of this student.

Teacher's name (printed): _____ Date: _____

Teacher's signature: _____

If submitting electronically, please type initials above to serve as your signature.

Phone: _____ Email: _____

QUESTIONS? Email admissions@icsva.org or call 703.941.1220.

Please complete electronically or print out and complete by hand. If completing electronically, save as a pdf and attach in email to admissions@icsva.org. If printing out, please fax to 703.563.3772 or mail to following address:

IMMANUEL CHRISTIAN SCHOOL, Attn: Admissions Office, 6915 Braddock Road, Springfield, VA 22151