



**PLEASE COMMENT ON THE FOLLOWING:**

- 1. Child's strengths and/or limitations \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 2. Do the parents/guardians support/follow through on specific school recommendations? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 3. Are parental expectations of child realistic? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 4. Are there any special concerns about the child's attendance or promptness in arrival or departure? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 5. What kind of program would you like to see for this child? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 6. Please make any other comments you wish to make about the applicant. Include any circumstances of which we should be aware.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SPECIFIC RECOMMENDATION:**

- Recommended
- Recommended with reservations  
*(please explain below)*
- Prefer not to make a recommendation  
*(please explain below)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Check here if any information pertaining to this child/family would be better communicated by phone. Please feel free to add further narrative on additional page(s) if desired.

Form completed by (print name) \_\_\_\_\_ Position \_\_\_\_\_  
School \_\_\_\_\_ Phone \_\_\_\_\_  
Your signature \_\_\_\_\_ Date \_\_\_\_\_