

Name of Applicant \_\_\_\_\_ Grade \_\_\_\_\_

**To the Parent or Guardian:**

I request that this recommendation form be sent to Berkshire Country Day School with the understanding that it will be used for admission purposes. I understand that I may not read this recommendation and agree that I will not seek to do so, either while my child is enrolled at BCD or subsequently.

Parent signature \_\_\_\_\_ Date \_\_\_\_\_

**To the teacher/writer:**

Thank you for your time and help in completing the enclosed evaluation. If you would prefer to write your own evaluation of the applicant's skills as well as describe his/her academic and personal qualities, please attach your evaluation to this form.

**Academic Qualities:**

Academic ability	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Limited
Academic achievement	<input type="checkbox"/> Far above expectations	<input type="checkbox"/> Better than tests	<input type="checkbox"/> As expected	<input type="checkbox"/> Below expectations
Intellectual curiosity	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Limited
Self-motivation	<input type="checkbox"/> Well-motivated	<input type="checkbox"/> Some desire to learn	<input type="checkbox"/> Only what is required	<input type="checkbox"/> Does very little
Effort/drive	<input type="checkbox"/> Maximum	<input type="checkbox"/> Usually good	<input type="checkbox"/> Sporadic	<input type="checkbox"/> Occasional
Study habits	<input type="checkbox"/> Well-organized	<input type="checkbox"/> Usually gets work done	<input type="checkbox"/> Easily distracted	<input type="checkbox"/> Poor habits
Ability to work alone	<input type="checkbox"/> Always works well	<input type="checkbox"/> Needs help occasionally	<input type="checkbox"/> Needs help frequently	<input type="checkbox"/> Needs supervision
Ability to work in a group	<input type="checkbox"/> Always works well	<input type="checkbox"/> Needs help occasionally	<input type="checkbox"/> Needs help frequently	<input type="checkbox"/> Needs supervision
Reads for pleasure	<input type="checkbox"/> Constantly	<input type="checkbox"/> Frequently	<input type="checkbox"/> Occasionally	<input type="checkbox"/> Rarely
Ability to express ideas orally	<input type="checkbox"/> Exceptional	<input type="checkbox"/> Good	<input type="checkbox"/> Has some difficulty	<input type="checkbox"/> Limited
Participates in discussions	<input type="checkbox"/> Joins in readily	<input type="checkbox"/> Participates occasionally	<input type="checkbox"/> Contributes when called on	<input type="checkbox"/> Rarely contributes
Ability to follow directions	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Limited
Uses suggestions or corrections	<input type="checkbox"/> Always	<input type="checkbox"/> Usually	<input type="checkbox"/> Needs reminding	<input type="checkbox"/> Rarely follows suggestions
Seeks help when needed	<input type="checkbox"/> Always	<input type="checkbox"/> Usually	<input type="checkbox"/> Occasionally	<input type="checkbox"/> Rarely
Attention span	<input type="checkbox"/> Exceptionally good	<input type="checkbox"/> Usually good	<input type="checkbox"/> Occasionally distracted	<input type="checkbox"/> Easily distracted

What are the first words you use to describe this student?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Personal Qualities:**

Maturity (for age and grade)	<input type="checkbox"/> Very mature	<input type="checkbox"/> Above average	<input type="checkbox"/> Age appropriate	<input type="checkbox"/> Immature
Consideration of others	<input type="checkbox"/> Extremely considerate	<input type="checkbox"/> Usually considerate	<input type="checkbox"/> Rarely considerate	<input type="checkbox"/> Selfish/unkind
Social adjustment with peers	<input type="checkbox"/> Well-adjusted	<input type="checkbox"/> Occasional problems	<input type="checkbox"/> Frequent problems	<input type="checkbox"/> Relates poorly
Sense of humor	<input type="checkbox"/> Delightful	<input type="checkbox"/> Good	<input type="checkbox"/> Lacking	<input type="checkbox"/> Unduly serious
Self-confidence	<input type="checkbox"/> Appears overly confident	<input type="checkbox"/> Healthy self-image	<input type="checkbox"/> Needs some support	<input type="checkbox"/> Needs much reassurance
Integrity	<input type="checkbox"/> Well-organized	<input type="checkbox"/> Usually gets work done	<input type="checkbox"/> Easily distracted	<input type="checkbox"/> Poor habits
Conduct	<input type="checkbox"/> Always works well	<input type="checkbox"/> Needs help occasionally	<input type="checkbox"/> Needs help frequently	<input type="checkbox"/> Needs supervision
Ability to work in a group	<input type="checkbox"/> Always works well	<input type="checkbox"/> Needs help occasionally	<input type="checkbox"/> Needs help frequently	<input type="checkbox"/> Needs supervision
Reads for pleasure	<input type="checkbox"/> Constantly	<input type="checkbox"/> Frequently	<input type="checkbox"/> Occasionally	<input type="checkbox"/> Rarely
Ability to express ideas orally	<input type="checkbox"/> Exceptional	<input type="checkbox"/> Good	<input type="checkbox"/> Has some difficulty	<input type="checkbox"/> Limited
Participates in discussions	<input type="checkbox"/> Joins in readily	<input type="checkbox"/> Participates occasionally	<input type="checkbox"/> Contributes if called upon	<input type="checkbox"/> Rarely contributes
Ability to follow directions	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Limited
Uses suggestions/corrections	<input type="checkbox"/> Always	<input type="checkbox"/> Usually	<input type="checkbox"/> Needs reminding	<input type="checkbox"/> Rarely
Seeks help when needed	<input type="checkbox"/> Always	<input type="checkbox"/> Usually	<input type="checkbox"/> Occasionally	<input type="checkbox"/> Rarely
Attention span	<input type="checkbox"/> Exceptionally good	<input type="checkbox"/> Usually good	<input type="checkbox"/> Occasionally distracted	<input type="checkbox"/> Easily distracted

Please explain any areas where improvement was identified.

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Please provide us with any additional information which might be helpful in our evaluation of this student.

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I would welcome a call from Berkshire Country Day School. I have known this candidate for \_\_\_\_ months \_\_\_\_ years.

Please list in what context you have known the candidate and list the courses you have taught him or her and the level of course difficulty (i.e. regular, accelerated)

Context \_\_\_\_\_

Courses \_\_\_\_\_

Print Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

School \_\_\_\_\_

School Address \_\_\_\_\_ School telephone \_\_\_\_\_

Return to: Director of Admission, Berkshire Country Day School