



## TEACHER RECOMMENDATION FORM – GENERAL STUDIES (APPLYING TO 2<sup>ND</sup> – 8<sup>TH</sup> GRADES)

**To the Parent:** Please submit this form along with a return envelope to your child's English teacher.

**To the Teacher:** This recommendation will be held in the strictest of confidence and used solely for admission purposes. **Please complete this form, place in the return envelope, sign the seal and mail directly to: Barkai Yeshivah Admissions, 5302 21<sup>st</sup> Avenue, Brooklyn, NY 11204.** Thank you for your time and effort, and the insight your comments will provide.

Name of Child: \_\_\_\_\_ Current School: \_\_\_\_\_

Grade: \_\_\_\_\_ Class Size: \_\_\_\_\_ Teacher's Name: \_\_\_\_\_

Subjects Taught: \_\_\_\_\_

Please check the appropriate boxes:

|                               | <b>Exceeds<br/>Expectations</b> | <b>Meets<br/>Expectations</b> | <b>Not meeting<br/>Expectations</b> |
|-------------------------------|---------------------------------|-------------------------------|-------------------------------------|
| Math Skills                   |                                 |                               |                                     |
| Reading Skills                |                                 |                               |                                     |
| Written Expression            |                                 |                               |                                     |
| Verbal Expression             |                                 |                               |                                     |
|                               | <b>Consistently</b>             | <b>Often</b>                  | <b>Area of Concern</b>              |
| Follows Classroom Rules       |                                 |                               |                                     |
| Pays Attention During Lessons |                                 |                               |                                     |
| Is Able to Focus on Tasks     |                                 |                               |                                     |
| Gets Along with Peers         |                                 |                               |                                     |
| Makes an Effort to Succeed    |                                 |                               |                                     |

Please describe the student's and his/her academic progress in your class:

Please describe the social and emotional development of the student:

Please provide any additional relevant information (Please include any physical, emotional, or learning disabilities which may affect school performance.)

*\*For more space please use the reverse side of this form.*

Teacher's Signature: \_\_\_\_\_

Date: \_\_\_\_\_