

SALISBURY ACADEMY TEACHER RECOMMENDATION FORM

For Applicants to Jr. Kindergarten / Kindergarten / First Grade

Dear Parents:		
Please complete this form and give it to	your child's present teacher	: .
Child's Name		
(Last)	(First)	(Preferred)
Grade applying for	School Y	Year

Dear Teacher:

The parents of the child named above have made application for him/her to attend Salisbury Academy. We would appreciate your returning this completed form to us at your earliest convenience. This form provides one way for us to get to know the child, but it is reviewed with the full awareness that young children are constantly changing and developing. If you note any major changes in your observations of the child in the ensuing weeks/months, please do not hesitate to contact us. Please know that we place particular value on your comments in each area.

CONFIDENTIAL

Please circle correct corresponding number:

SOCIAL DEVELOPMENT	Excellent	Good	Average	Below Average
Self-help and Independence	1	2	3	4
Attention (large group/small				
group listening)	1	2	3	4
Cooperation	1	2	3	4
Play	1	2	3	4
Sharing with children	1	2	3	4
Sharing with adults	1	2	3	4
Please describe any specific difficultie	s:			

Please circle correct corresponding number:

ACADEMIC READINESS	Excellent	Good	<u>Average</u>	Below Average
Follows Directions	1	2	3	4
Language Development	1	2	3	4
Articulation	1	2	3	4
Math (if applicable)	1	2	3	4
Reading (if applicable)	1	2	3	4
Fine Motor Skills	1	2	3	4
Please describe any specific difficulti	ies:			

GROSS MOTOR DEVELOPME	<u>NT</u> 1		2	3	4
PERSONAL DATA A. Please describe the applicant's special interests:					
B. How does this applicant express anger or frustration?					
C. Do you feel a need to mo	onitor this chil	ld more closely	y than most?		
Your name (please print)	itle	First	Middle	Last	
School					
School AddressStreet			City	State	Zip
Class (or age) Taught					
Days per Week	Hours per	Day	Size	of Group	
Signature		_ Phone_		Date	
If you have any questions or comments, please contact the Director of Admissions. Thank you for your cooperation in helping us with our admission process.					
Please return this form to:		36-3002			

Excellent

Good

Average

Below Average