



SAINT MARTIN DE PORRES

Teacher Recommendation Form

(One form must be completed by both Math and Language Arts Teacher)

Student Name: _____

Teacher's Name: _____

Course(s) Taught: _____

School: _____

SCHOOL OFFICIAL Please complete and sign this section of the form. Feel free to attach additional sheets of paper if responding in depth to any portion of this section. Information on this form will remain confidential and will not be shared with parents or students. Please send this form directly to the Saint Martin de Porres High School Office of Admissions.

Academic Ability	<i>Outstanding</i>	<i>Good</i>	<i>Avg.</i>	<i>Below Avg.</i>	<i>N/A</i>
Verbal ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mathematical ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creative ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to grasp new concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written communications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Classroom Performance	<i>Outstanding</i>	<i>Good</i>	<i>Avg.</i>	<i>Below Avg.</i>	<i>N/A</i>
Classroom achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participation in discussions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing mechanics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of written ideas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to follow directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preparation for class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Personal Abilities	<i>Outstanding</i>	<i>Good</i>	<i>Avg.</i>	<i>Below Avg.</i>	<i>N/A</i>
Maturity for grade	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseverance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

School Behavior	<i>Outstanding</i>	<i>Good</i>	<i>Avg.</i>	<i>Below Avg.</i>	<i>N/A</i>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work in a group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Response to constructive feedback	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to seek needed help	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention span	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

School Behavior (continued)

	<i>Outstanding</i>	<i>Good</i>	<i>Avg.</i>	<i>Below Avg.</i>	<i>N/A</i>
Interaction with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect for adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	<i>Strongly Recommend</i>	<i>Recommend</i>	<i>Recommend with Reservations</i>	<i>I Do Not Recommend</i>
Academics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Students enrolled at Saint Martin de Porres High School are required to participate in a professional work-study program to fund a portion of their high school education. How would you rank the student's work potential?

Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Please circle the words that describe this student:

persistent	passive	responsible	organized	assertive	self-disciplined
irresponsible	distractible	follower	social	popular	negative leader
overprotected	loner	energetic	distracting	cheerful	positive leader
disobedient	confident	perfectionist	motivated	anxious	compassionate
humorous	vivacious	restless	devious	impulsive	conscientious
self-centered	honest	irritable	dishonest	articulate	easily discouraged
easily frustrated	manipulative	aggressive	other _____		

Teacher Comments:

Your feedback is critical to our decision-making process. thank you!

Evaluator's Name (printed): _____

Position/School: _____

Signature: _____ Date: _____

Email: _____ Telephone: _____

Please respond to: Office of Admissions
 Saint Martin de Porres High School
 6202 St. Clair Avenue
 Cleveland, OH 44103
 Phone: (216) 881-5406
 Email: admissions@stmdphs.org
 Fax: (216) 881-8303