

## TEACHER RECOMMENDATION – GENERAL STUDIES

Teacher: Thank you for taking the time to complete this recommendation form.  
All information is confidential and will be used for admissions purposes only.

Name of student \_\_\_\_\_ Date \_\_\_\_\_

Current School \_\_\_\_\_ Subject \_\_\_\_\_

Name of Teacher \_\_\_\_\_

Please check the single most appropriate box in each of the listed categories. Consider the student in terms of the grade as a whole.

|                               | N/A | Below Average | Average | Good | Excellent |
|-------------------------------|-----|---------------|---------|------|-----------|
| Academic Motivation           |     |               |         |      |           |
| Effective class engagement    |     |               |         |      |           |
| Intellectual/academic ability |     |               |         |      |           |
| Organized                     |     |               |         |      |           |
| Concern for others            |     |               |         |      |           |
| Independence                  |     |               |         |      |           |
| Reaction to setbacks          |     |               |         |      |           |

Please include any other relevant information, eg. strengths, obstacles, difficulties overcome by student

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Signature \_\_\_\_\_

