



Adventure Christian School
 6401 B Stanford Ranch Road, Roseville, CA 95678
 Phone: (916) 781-2986 | Fax: (916) 771-8005
www.adventurechristianschool.org

TEACHER RECOMMENDATION FORM
(To be completed by a present or recent *teacher* of the student)

Applying for grade _____

_____ is applying for admission to Adventure Christian School. In order for us to properly consider the applicant for admissions, please answer the following questions to the best of your knowledge. Your comments will be held in strict confidence.

How long have you known the applicant?

Do you know of any honors or special achievements received by the applicant? If so, please list:

Please place a check in the appropriate box after each statement:

How much supervision do you think the applicant needs?

Constant:	Frequent:	Occasional:	Minimal:
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Among students you have known, how would you rank the applicant academically?

Upper 10%	Upper 25%	Average:	Lower 25%	Lower 10%
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How would you rank the applicant in each of these areas?

	Superior	Good	Average	Poor
General Personality				
Character & Integrity				
Emotional Stability				
Manners				
Sociability				
Cooperativeness				
Leadership Qualities				

What are the applicant's primary interests?

Artistic	Athletic	Drama	Intellectual	Literary	Musical	Religious	Scientific	Social
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Please make any additional comments you feel might be of interest of value: _____

Is there any additional information that would be better conveyed in a conversation? Yes_____ No_____

Print Name _____ Title _____

Please email completed form to: info@adventurechristian.org or fax to: (916) 771-8005 Attention: Admissions

Signature _____ Date _____

Email address _____

Name of School _____ Phone Number _____
