



Entering 2nd-6th Grade General Studies Teacher Recommendation

Student's Name: _____ **Applying for Grade:** _____ **in Fall 20** _____

Parents: Please insert your child's name and give this form to the current general studies teacher.

Your signatures below indicate that you understand this confidential recommendation is required and an important part of your child's admission application and you understand that you will not have access to it.

Parent's Name (print): _____ **Signature:** _____ **Date:** _____

Parent's Name (print): _____ **Signature:** _____ **Date:** _____

To the Teacher: Please complete the form below and return to the Enrollment Office at Soille San Diego Hebrew Day School. **Please submit via email to Beth Licha, Director of Enrollment, at blicha@ssdhds.org, or via postal mail to 3630 Afton Road, San Diego, CA 92123.** This recommendation will remain confidential and will not be shared with the student or any members of their family. We appreciate your cooperation and candor.

Academic Qualities

Not Observed		Poor	Fair	Average	Good	Excellent
	Reading Comprehension					
	Reading Fluency					
	Phonics/Work Attack					
	Spelling					
	Vocabulary					
	Grammar Skills					
	Attention Span					
	Ability to Work Independently					
	Critical thinking and Abstract Thinking Skills					
	Mental Math					
	Number Sense					
	Understanding of Grade Level Math Concepts					

Personal Qualities

Not Observed		Poor	Fair	Average	Good	Excellent
	Creativity					
	Self-Confidence					
	Leadership Potential					
	Reaction to Criticism/Setbacks					
	Concern for Others					
	Personal Conduct and Integrity					
	Ability to Work in Groups					

Overall Recommendations

	Not at All	With Reservation	With Confidence	Enthusiastically
I recommend this student:				
Academic Ability and Promise				
Character and Personal Promise				



Please comment on this student's study habits, if this is an area of concern:

Please share any other comments regarding this student which you feel we would benefit from knowing:

Is there any additional information which you feel can be better conveyed in a phone conversation? Yes No

Hours and phone number where you can be reached: _____

Teacher's name: _____ Email address: _____

Subject(s) and grade level(s) in which you taught this student: _____

School: _____ School Phone (_____) _____

Signature: _____ Date: _____