


**LANSING CHRISTIAN**  
**Confidential Teacher's Recommendation**  
**Third - Sixth Grade Applicants**

***Family and Student Information***

Student Name \_\_\_\_\_ Applying for Grade: \_\_\_\_\_

*By signing below, I agree to waive my right of access to information provided on this form.*

Parent/Guardian Signature \_\_\_\_\_ Print Parent/Guardian Name \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Print Parent/Guardian Name \_\_\_\_\_ Date \_\_\_\_\_

***Teacher Recommendation***

*Please complete and return this recommendation directly to Lansing Christian School.*

*If you would like to provide any further information with the answers to your questions, you may do so in the space provided or on another sheet of paper.*

Compared to other students, how would you rate this applicant?

- One of the top I've ever encountered in my career  
  Excellent  
  Good (above average)  
 Fair  
  Weak

Please indicate how you would rate the applicant in the following areas:

	1	2	3	4	5	Your Rating
<b>Academic Ability</b>	Superior	Fine student	Capable of satisfactory work	Marginal ability	Poor, academic risk	
<b>Independent Work and Study Habits</b>	Exceptional	Well above average	Average	Weak	Unsatisfactory	
<b>Integrity</b>	Exceptional	High moral values	Upright; no cause to question	Weak or questionable	Record of dishonesty	
<b>Conduct</b>	Outstanding	Generally excellent	Satisfactory	Unacceptable	Poor or disruptive	
<b>Motivation</b>	Excellent	Well above average	Average	Weak; needs encouragement	Poor	
<b>Attitude and Cooperation</b>	Outstanding	Generally excellent	Satisfactory	Continually less than satisfactory	Poor	
<b>Maturity and Stability</b>	Excellent	Well above average	Average	Below expected level	Poor	
<b>Recommendation as a Student</b>	Outstanding	Excellent	Good	Fair	Poor	

(OVER)

How would you rate the applicant's parental involvement in their education?

- Very cooperative    Usually cooperative    Rarely cooperative    Apathetic    Never communicate

How would you evaluate the applicant's character?

- Outgoing    Strong-willed    Without enthusiasm    Quiet, introverted

---

---

---

Does the applicant have any significant limitations (physical, emotional, social)?

- Yes    No   *If "Yes", please explain.*

---

---

---

Has the applicant ever been recommended to a special program for the following needs?

- Gifted    Learning Disabled    Impaired vision    Speech    Hearing

---

---

---

Is the applicant in good standing and eligible to continue to the next grade level?

- Yes    No    Not applicable

---

---

---

Has there ever been a need for administrative involvement in disciplinary action regarding this student?

- Yes    No   *If "Yes", please explain.*

---

---

---

School Name \_\_\_\_\_ Address \_\_\_\_\_

Year you taught this applicant \_\_\_\_\_ Title/Subject Taught \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Teacher Signature

Name (please print)

Date



Lansing Christian School

3405 Belle Chase Way, Lansing MI 48911

Main Office Phone: (517) 882-5779 Fax: (517) 882-5849

[www.lansingchristianschool.org](http://www.lansingchristianschool.org)