

# Saint Joseph Catholic Parish School

958 Epps Bridge Parkway, Athens, GA 30606 706-543-1621 FAX 706-543-0149

### SCHOOL RECOMMENDATION (Kindergarten and 1st Grade)

## To be filled out by applicant: \_\_\_\_\_ Applying to grade: \_\_\_\_\_ Name of Applicant: (Name of referring school) \_\_\_\_\_\_ has my permission to answer the questions below and mail this information to Saint Joseph Catholic Parish School at the above address. Signature(s) of Parent/Guardian Date To be filled out by recommending school personnel: Classroom teachers are encouraged to offer their observations regarding applicant's performance. Copies of this form may be made to accommodate the input of more than one teacher. Name of School: Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_ \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Name of Principal: The above student has applied for admissions to Saint Joseph Catholic Parish School for the school year 2019-2020. Our program is strictly academic offering a basic curriculum. We try to provide for a normal range of learning differences, but are unable to offer remediation for significant learning needs of students. In the best interest of the child seeking admission to Saint Joseph Catholic Parish School, would you please answer the following questions. Length of time the student has attended your school \_\_\_\_\_\_ 2. Grade placement for the current academic year \_\_\_\_\_ 3. Suggested grade placement for the coming school year, 2019-2020\_\_\_\_\_ 4. Maturity Level: Below Age Level \_\_\_\_\_ Age Apropriate\_\_\_\_\_ Advanced \_\_\_\_\_ 5. In relationship to other students, how much teacher assistance and attention did this applicant Significantly more Average Less 6. Has the student ever been recommended for or identified as needing: a. Psychological Testing Yes No Yes\_\_\_\_\_ No\_\_\_\_ b. Special Education c. Gifted Program Yes\_\_\_\_\_ No\_\_\_\_ d. Grade Retention Yes\_\_\_\_\_ No\_\_\_\_ e. Tutoring Yes No 7. If the answer was Yes to any of the above, to what degree were the parents cooperative?



# Saint Joseph Catholic Parish School

958 Epps Bridge Parkway, Athens, GA 30606 706-543-1621 FAX 706-543-0149

#### 8. Grade the following areas using the below criteria:

Printed Name

1. Outs	tanding 2. Satisfa	actory 3. Bel	low-Average	4. Area of Conc	ern
Ability to a	Behaviors in a large a dapt to changes in re e conflict resolution	outine		Interaction v Reaction to	with peers new situations
	Follows directions ar	nd ovnlanations			
	Speaks in an age-ap			syntax, gramma	r)
with sounds	al awareness: Recogn s ginning awareness o	-		cipates in other a	ctivities that play
	of quantitative conce lassifies by two prop	-	pulatives to sho	w knowledge of n	umbers)
9. Please comment of be detrimental to lear					
10. In your dealings v	_			d's learning? Hov	w have they
11. Based on your kno academically-based c			•	u recommend hir	m/her for an
Thank you for your co	poperation and the e	extra time to fill	in this form.		
Signature of person c	ompleting this form				Date