



Early Childhood Director Letter of Recommendation
For applicants entering Infant through Pre-Kindergarten

The Hebrew Academy Admission Committee greatly appreciates your confidential response to the following questions as we get to know the following child:

Student name: _____

Grade entering for 2019-2020 school year: _____

Date of birth: _____ Today's date: _____

How long have you known this child? _____

Please circle the most appropriate answer for the following questions:

Is the applicant progressing at a developmentally appropriate rate? Yes No

This applicant is currently working:

Above Grade Level On Grade Level Below Grade Level

Has the applicant had any issues with compliance and/or following classroom rules?
Yes No **If yes, please explain:** _____

Has the applicant been referred for any therapeutic interventions such as OT, PT, Speech Therapy, Behavioral Therapy, Psychoeducational Evaluation: Yes No
If yes, please explain: _____

Have the applicant's parents followed through with the referral and any related interventions as a result? Yes No

If no, please explain: _____

Please continue on next page/reverse side

Has the applicant displayed aggressive behavior? Yes No

If yes, please describe: _____

Is this applicant a proficient English speaker for his/her age? Yes No

Will this applicant be ready to matriculate into the next grade level? Yes No

How cooperative are the parents of the applicant?

Very cooperative Somewhat cooperative Rarely cooperative

How well do the parents uphold the moral values of your school?

Very well Moderately Poorly

How supportive are the parents of school policies and procedures?

Very supportive Somewhat supportive Rarely supportive

How well do the parents work with the suggestions of the teachers and administration?

Very well Moderately Poorly

How have the parents contributed to your program for example: reading stories, volunteering, special skills, and so on: _____

Please share a few of your thoughts about this applicant and/or the applicant's parents: _____

Your name: _____ Phone: _____

Your title: _____ School: _____

Thank you for your cooperation. **Please return this form directly to Hebrew Academy, Attention: Dean of Admission, via Email or US Mail:**

E-mail: admission@rasg.org

US Mail: Hebrew Academy, 2400 Pine Tree Drive, Miami Beach, FL 33140

Phone: 305-532-6421 ext. 105