

## **Math Teacher Recommendation**

Grade 9-12 Applicants

We greatly appreciate your feedback. All of your comments are strictly confidential and will not be shared with student or family members applying to the Hebrew Academy.

Student name					
Current school					
ntering gradein the 2019-2020 school year. Today's date					
How long have you taught this student?					
Which words or phrases come to mind in describing this student?					
What are this student's strengths?					
Weaknesses?					
What academic level is your course? Honors Regular Modified  Has this student demonstrated any behavioral or academic concerns? YES NO  If yes please describe:					
Does this student receive any academic accommodations or modifications? YES NO If yes please describe:					
If yes, do you believe this student should continue receiving said modifications or accommodations? YES NO					
Does this student require social, emotional, or behavioral support at school or home? YES NO If yes, please describe:					
Does this student require small group or individual instruction? YES NO  If yes, please describe:					

Please continue to next/reverse page

If English is this student's second language do you believe he/she will require additional ESOL support services? YES NO

Please circle the appropriate word for the following:

Displays self-control	sometimes	generally	always	never	
Follows rules	sometimes	generally	always	never	
Respectful	sometimes	generally	always	never	
Maturity	good	poor	improving		
Sense of ethics	good	poor	improving		
Peer relations	good	poor	improving		
Leadership potential	good	poor	improving		
Attention span	good	poor	improving		
Listening skills	good	poor	improving		
Reaction to criticism	good	poor	improving		
Completes work	consistently	rarely	sporadically		
Curious	sometimes	generally	never		
Works independently	sometimes	generally	never		
Motivated	sometimes	generally	never		
Please add any information you would like the Hebrew Academy Admission Committee to know about this student.					
I have additional information I would like to speak to you about: YES NO					
Your name	Position				
Phone:					

Thank you for your assistance as we pursue the best academic interests of this applicant. Please return this recommendation form via Email or US Mail to:

Dean of Admission
Hebrew Academy
admission@rasg.org

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