



English 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 _____

Entering grade _____ in 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
2400 Pine Tree Drive, Miami Beach, FL 33140
Phone (305) 532-6421 ext. 105