



Judaic or Ivrit Teacher Recommendation

Kindergarten-Grade 12 Applicants

Dear Teacher,

We would greatly appreciate your comments on the following recommendation form. All of your comments are strictly confidential and will not be shared with students or family members making application to the Hebrew Academy.

Student name

Subject

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? _____

Has this child demonstrated any behavioral or academic concerns? YES NO

If yes please describe: _____

If English is this student's second language do you believe he/she will require additional ESOL support services? _____

Please continue on the reverse side.

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 admissions committee to know about this student. _____

I have other information I would like to speak to you about, please circle: 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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Phone (305) 532-6421 ext. 105