



CONFIDENTIAL STUDENT RECOMMENDATION

1234 NE Riddell Road Bremerton, WA 98310 Office: (360) 373-2116 Fax: (360) 377-0686 www.peacelutherannw.org

Instructions to Parents: Please complete the *applicant information only*; then give the form to your child's current school. Ask the school to complete it and mail the completed form directly to Peace Lutheran School at the address above.

APPLICANT INFORMATION

Name: _____ Applying for Grade: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Current School: _____ Phone: (____) _____

Parent's Name: _____ Parent's Signature: _____

Instructions to School: The student named above has applied for admission to Peace Lutheran School, Bremerton. Please have this form completed by the teacher who knows the student best. Please mail the completed form directly to Peace Lutheran School at the above address. *Do not return to the applicant's parents.*

	4	3	2	1	Rating
ACADEMIC ABILITY	Exceptional	Average	Lower/marginal	Poor	
HOMEWORK RESPONSIBILITY	Always in on time	Usually in on time	Frequently missing	Record of irresponsibility	
READING COMPREHENSION	Outstanding	Grade Level	Below Grade Level	Poor	
WORK ETHIC	Works ins independently	Usually on task	Frequently off task	Consistently needs attention	
BEHAVIOR AND ATTITUDE	Outstanding in every respect	Good or acceptable	Marginal	Poor	
PEER RELATIONSHIPS	Highly respected	Usually no problems	Some difficulty in cultivating	Poor/unhealthy, unskilled	

Any known and diagnosed learning difference(s)? Yes No

If yes, please explain: _____

Does the family meet their financial responsibilities? Yes No

Comments: _____

Signature: _____ Title: _____ Date: _____