

31 So. Chestnut Street

Sacred Hearts School

Bradford, MA 01835

Tel. (978) 372-5451 Fax (978) 372-1110

CLASSROOM TEACHER RECOMMENDATION FORM

I have applied for admission my child, _____, into grade _____ at Sacred Hearts School in Bradford, MA. SHS would appreciate your evaluation of the following. Thank you. _____

Parent's signature

General Behavior: Poor _____ Fair _____ Good _____ Excellent _____

Comments:

Study Habits: Poor _____ Fair _____ Good _____ Excellent _____

Comments:

Scholastic Standing: Poor _____ Fair _____ Good _____ Excellent _____

Comments:

Does this student need extra help, remediation, modified work or special ed.?

Please explain:

Teacher's signature _____ Date _____

School Name, Address _____

Please attach the latest copy of the student's report card and return both as soon as possible. Thank you for your time and cooperation in giving us this reference.