

# HILLCREST CHRISTIAN SCHOOL

17531 Rinaldi St., Granada Hills, CA 91344 - Phone 818-368-7071 Fax 818-363-4455

Email:admin@hillcrestchristianschool.org

## RECOMMENDATION QUESTIONNAIRE

Referral by Teacher

School Year \_\_\_\_\_

Grade Entering \_\_\_\_\_

### TO BE COMPLETED BY APPLICANT'S PARENT OR GUARDIAN (PLEASE PRINT OR TYPE LEGIBLY):

Legal name of applicant \_\_\_\_\_

Last

First

Middle

Applicant's address \_\_\_\_\_

Street

City

ZIP Code

(NOTE TO APPLICANT: Please provide a stamped envelope, addressed to the Administrator at the above address, as a courtesy to the person completing the remainder of this referral form.)

I hereby give permission for this information to be released to the above school. \_\_\_\_\_

Parent Signature

### TO BE COMPLETED BY TEACHER:

The above named applicant is applying for admission into Hillcrest Christian School and is requesting that you provide a reference. We are a Christian institution with specific purposes and plans so we wish to admit those who will benefit the most from being here. It is essential that you be candid, fair, and accurate with your remarks and evaluation. Please mail the completed form to the above address as soon as possible. WE RESPECTFULLY REQUEST THAT YOU DO NOT RETURN THIS TO THE APPLICANT.

1. How long have you known the applicant? \_\_\_\_\_

2. How well do you know the applicant? \_\_\_\_ Very well \_\_\_\_ Well \_\_\_\_ Casually

3. How is the applicant best characterized? (check all that apply) \_\_\_\_ Studious \_\_\_\_ Athletic \_\_\_\_ Artistic \_\_\_\_ Musical  
\_\_\_\_ Social \_\_\_\_ Religious \_\_\_\_ Self-disciplined \_\_\_\_ Teachable \_\_\_\_ Positive Leader  
\_\_\_\_ Other (Explain) \_\_\_\_\_

4. Has the applicant, to the best of your knowledge, been suspended or expelled from any school? \_\_\_\_ Yes \_\_\_\_ No

If yes, please explain \_\_\_\_\_

5. Has the applicant, to the best of your knowledge, been in any other trouble? \_\_\_\_ Yes \_\_\_\_ No

If yes, please explain \_\_\_\_\_

6. Does the applicant form friendships easily? \_\_\_\_ Yes \_\_\_\_ No If no, please explain why \_\_\_\_\_

7. How much supervision do you feel the applicant requires?

Behaviorally: \_\_\_\_ Minimal \_\_\_\_ Occasional \_\_\_\_ Frequent \_\_\_\_ Constant

Academically: \_\_\_\_ Minimal \_\_\_\_ Occasional \_\_\_\_ Frequent \_\_\_\_ Constant

8. Have you ever known the applicant to smoke, drink, or use drugs of any kind? \_\_\_\_ Yes \_\_\_\_ No

If yes, please explain \_\_\_\_\_

9. Have you ever had a reason to question the applicant's moral character? \_\_\_\_ Yes \_\_\_\_ No

If yes, please explain \_\_\_\_\_

10. How would you summarize the applicant's attendance record?

\_\_\_\_ Seldom/never absent \_\_\_\_ Average absences \_\_\_\_ Excessive absences

11. How would you summarize the applicant's punctuality record?

\_\_\_\_ Seldom/never tardy \_\_\_\_ Occasionally tardy \_\_\_\_ Frequently tardy

CONTINUED ON REVERSE SIDE

12. How would you evaluate the applicant's overall influence on his/her peers?  
 Very positive     Somewhat positive     Neutral     Negative
13. How would you evaluate the applicant's personal appearance and dress?  
 Neat, clean, modest, appropriate, avoids extremes     Average     Careless and/or inappropriate
14. Is the applicant the kind of person you would like to be a close friend for your own child?  Yes     No
15. How does the applicant demonstrate kindness toward others?  Consistently     Usually     Rarely
16. How do the applicant's parents cooperate with school personnel and policies?  Active/constructive  
 Argumentative/critical, but cooperative     Cooperative when called upon     Non-cooperative
17. Please estimate the applicant's intellectual ability. (check one)  
 Upper 10%     Upper 25%     Average     Lower 25%     Lower 10%
18. What degree of success in the next grade would you predict for the applicant?  
 Unusually high     Above average     Average     Below average
19. In what area(s) will the applicant need the greatest guidance academically? \_\_\_\_\_
20. We would be grateful if you would use this space for any other additional comments or pertinent information that merit consideration for this applicant. \_\_\_\_\_
21. Estimate of academic qualities (check the most appropriate box).

**PLEASE FEEL FREE TO MAKE ANY ADDITIONAL COMMENTS NEXT TO THE APPROPRIATE CATEGORIES**

	4 Excellent	3 Above Average	2 Average	1 Below Average	N/A	Comments
Assignment completion						
Classroom contribution						
Communication skills						
Performance on tests						
Maturity						
Motivation						
Overall performance						

22.  I would recommend     I would recommend, with reservations     I would not recommend

23. Are you related to the applicant?  If so, how? \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (please print) \_\_\_\_\_ Your position \_\_\_\_\_

School name \_\_\_\_\_ Phone \_\_\_\_\_

Student's current or recently completed grade level \_\_\_\_\_.