

MATH TEACHER RECOMMENDATION

To be completed for 6th - 12th grade applicants



PINECASTLE
CHRISTIAN ACADEMY
One Family. One Purpose.

Parents: Please provide information in top portion only. Give to your child's teacher to complete & return to PCCA at address below.

Permission to release information: _____ Date: _____
Parent signature _____
Student's Name: _____ Current Grade: _____
LAST FIRST Teacher: _____

Dear Math Teacher:

The child named above has applied for admission to Pine Castle Christian Academy. Please complete the form below and return to the address provided. Check one rating for each area. If you wish to discuss this student personally rather than completing this form, please check here _____, sign the form and note your telephone number, and the Academy will contact you.

AREAS TO EVALUATE	Poor	Average	Good	Excellent	Comments
Academic ability					
Academic performance					
Motivation					
Attitude/Cooperation					
Maturity/Stability					
Conduct					
Ability to relate to peers					
Respect for adults					
Integrity					
Attendance					
Reading Comprehension					
Writing Skills					

Is the student on an IEP and/or receiving accommodations? If yes, please list: _____

Is the student working on a modified curriculum? YES NO Is the student on grade level? YES NO

Does the student have any significant limitations (physical, social, or emotional)? _____

Is the student in good standing and eligible to return next year? YES NO

If no, why not? _____

Has there been a need for administrative involvement in disciplinary action with this student? YES NO

If yes, please explain. _____

How would you rate the parents' involvement?

Very cooperative Rarely cooperative Disinterested No communication with them

Is this recommendation consistent with the student's report card? YES NO

Print your name _____ School Name _____

Signature and position _____

Thank you for your assistance; your prompt response is much appreciated. If you have any questions, please call (407)313-7222

Please return to: PCCA Main Office; 7101 Lake Ellenor Drive; Orlando, FL 32809; fax 407-313-7226