

# TEACHER RECOMMENDATION

To be completed for 1st - 5th 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: \_\_\_\_\_  
Parent signature

Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_  
LAST FIRST

Current Grade: \_\_\_\_\_

Teacher : \_\_\_\_\_

Dear 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	Not Able to Comment
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 students 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**