



**SHATTUCK-ST. MARY'S**

1000 Shumway Avenue • P.O. Box 218  
Faribault, Minnesota 55021 • 800-421-2724 • www.s-sm.org

Mathematics Teacher Recommendation Form

**To the Applicant:**

■ Please type or print your name in the space below and then give this form to your current Mathematics teacher, along with a stamped envelope addressed to Admissions Office, Shattuck-St. Mary's, P.O. Box 218, Faribault, Minnesota 55021.

Name of student *(please print)* \_\_\_\_\_ Applicant to grade \_\_\_\_\_

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

**To the Parent/Guardian:**

Please read and sign the statement below.  
I acknowledge that I waive my right to read the confidential teacher recommendation and the school report for the student listed above.

Name of parent of guardian \_\_\_\_\_

Signature of parent or guardian \_\_\_\_\_ Date \_\_\_\_\_

**To the Teacher:**

This recommendation will remain confidential and will not become part of the student's permanent record. When you have completed it, please send it to Shattuck-St. Mary's in the envelope the student has provided. Be sure the parent/guardian has signed the form in the space above. Feel free to use additional sheets, if necessary.

How well do you know the student academically? \_\_\_\_\_ As a person? \_\_\_\_\_

In what years did you teach the student? \_\_\_\_\_ How large is the class? \_\_\_\_\_

What course(s)? \_\_\_\_\_

Is the student on a block schedule?  Yes  No

Briefly describe your course. It is especially helpful to know what texts are used and if the students are grouped by ability.

\_\_\_\_\_

Next year what math course would be the most appropriate placement for the student? \_\_\_\_\_

Is this course part of a tracking system or designated as an honors or accelerated course?  Yes  No

**Student's Mathematical Background:** The courses listed below suggest a sequence typical of the mathematics curriculum in many U.S. schools. If your school does not follow this sequence, please attach your curriculum. Please check the courses or list others which the student will have completed by the end of the current school year.

- General Mathematics
- Pre-algebra
- Basic First Year Algebra (does not include extensive study of rational expressions, irrational numbers, and quadratic equations)
- First Year Algebra (a thorough course which included quadratics)
- Geometry
- Second Year Algebra (not including trigonometry)
- Second Year Algebra (includes numerical trigonometry through the laws of sine and cosine)
- Pre-Calculus (including analytical trigonometry)
- Calculus (an introduction)
- Calculus (Advanced Placement AB)
- Calculus (Advanced Placement BC)
- \_\_\_\_\_
- \_\_\_\_\_

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught.

If you have no fair basis for judgment, do not hesitate to say so.

	One of the top few I have ever encountered	Excellent (top 10% this year)	Good (above average)	Average	Below average	No basis for judgment
Knowledge of the basic Skills						
Accuracy in the Use of Basic Skills						
Problem Solving Ability						
Reasoning Ability						
Understanding of and Appreciation for the Underlying Ideas and Concepts						
Effort						
Overall Performance						
Willingness to Accept the Challenge of the More Difficult Problems and Exercises						
Command of Mathematics When Compared to Other Students Whom You Have Taught						

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Name of student \_\_\_\_\_

What are the first three words that come to mind to describe this student?

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught. If you have no fair basis for judgment, do not hesitate to say so.

	One of the top few I have ever encountered	Excellent (top 10% this year)	Good (above average)	Average	Below average	No basis for judgment
Academic Potential						
Academic Achievement						
Intellectual Curiosity						
Effort/Determination						
Ability to Work Independently						
Organization						
Creativity						
Willingness to Take Intellectual Risks						
Concern for Others						
Honesty/Integrity						
Self-Esteem						
Maturity (relative to age)						
Responsibility						
Respect Accorded by Faculty						
Respect Accorded by Peers						
Emotional Stability						
Overall Evaluation as a Person						
Overall Evaluation as a Student						

If the student is relatively weak or strong in any areas listed above, please elaborate.

\_\_\_\_\_  
 \_\_\_\_\_

Please comment on this student's character, citizenship, and contributions to your community.

\_\_\_\_\_  
 \_\_\_\_\_

Please add any additional information that will give us a more complete picture of the student.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Thank you for your valuable time to complete this evaluation. Your reflections are an important part of the student's application.

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

Print Name \_\_\_\_\_ School Name \_\_\_\_\_

Mailing address \_\_\_\_\_

E-mail address \_\_\_\_\_ Telephone ( ) \_\_\_\_\_