



SHATTUCK-ST. MARY'S

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

To the Applicant:

■ Please type or print your name in the space below and then give this form to your current Principal, Head of School, or Counselor, 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 Principal/Head of School/Counselor:

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? _____

Please submit these materials with this recommendation:

- Recent teacher reports, if any
- Standardized test scores
- A school profile, if available
- Final or mid-semester grades for current term (must be included)
- Grades since 6th grade, if available (for younger children, grades for all years)

In what month does your school year begin? _____ end? _____

School serves grades: _____ to _____. Number of students in entire school _____

Does your school use a block scheduling system? Yes No

Please explain your school's grading system. What is the passing mark? _____ Honors mark? _____

What percentage of your students receive which grades? _____

Does your school rank? Yes No Is your rank Approximate Exact How many students are in the entire grade? _____

This candidate ranks _____ out of _____. _____ other students share this rank.

Are students placed in sections according to ability? Yes No If yes, please tell us in which level the applicant is placed for each subject.

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

1. _____ 2. _____ 3. _____

If the student's attendance record is not listed on the transcript, please indicate the number of days he or she has been absent or tardy each year while at your school. _____

If the student is not, or has not been, in good academic standing, please explain: _____

Name of student _____

Has the student ever been dismissed, suspended, placed on probation, or received other serious disciplinary sanction? Yes No

Has he or she withdrawn from school voluntarily for an extended period of time for reasons other than health? Yes No

If the answer to either or both of these questions is yes, please provide a full explanation on a separate piece of paper.

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 () _____