

Laconia Christian Academy

1386 Meredith Center Rd. ♦ Laconia, NH 03246 ♦ (603) 524-3250 ♦ Fax: (603) 524-3285

FORM

1

MATH TEACHER RECOMMENDATION/ GRADES 7-12

Name of applicant: _____ Applying for grade: _____

TO THE TEACHER: The above-named student is an applicant for admission to Laconia Christian Academy. The information on this form is used in both the admissions and placement process and will be made available to future teachers. Thank you for taking the time to complete and return this assessment.

1. COMPETENCY

Please rate the student's competency in each skill area according to the scale provided. (Do not rate areas about which you do not have a clear sense of the student's abilities.) 4 Outstanding/ 3 Above average/ 2 Average/ 1 Below average

- Current level of achievement _____
- Computational accuracy _____
- Computational speed _____
- Mastery of concepts _____
- Problem-solving skills _____
- For students applying to grades 9-12: Ability to succeed in a college preparatory curriculum and in college _____

2. What do you perceive as the applicant's greatest strength in mathematics? _____

3. What do you perceive as the applicant's greatest need in mathematics? _____

4. PERSONAL QUALITIES	Below Average	Average	Good	Excellent	Truly Outstanding	Comments
Honesty/Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Responsibility for actions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Respect for peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Respect for adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Please complete other side.

