FREDERICA ACADEMY APPLICATION FOR ADMISSION

CURRENT TEACHER RECOMMENDATION (PRE-KINDERGARTEN & KINDERGARTEN)

TO THE APPLICANT: Please print or type the student's name below and give this form to his/her current teacher for completion. Please provide the teacher with a stamped envelope addressed to:

OFFICE OF ADMISSION, FREDERICA ACADEMY, 200 MURRAY WAY, SAINT SIMONS ISLAND, GEORGIA 31522

Student's Name: ____

Applying to: Pre-Kindergarten / Kindergarten (Please Circle) To Begin: _____

TO THE TEACHER: This student is applying for admission to Frederica Academy, an independent college preparatory school. We are interested in your evaluation of his/her abilities and potential. Your input is a vital part of our process. Please complete this form carefully and thoroughly. If you have questions, please feel free to call (912) 638-9981 extension 106.

How long have you known the student? _____

In what grade(s) and subject(s) have you taught him/her? _____

If you had to indicate the outstanding attributes of this student in a few words, what would they be?______

Work Habits	Developing	Age Appropriate	Exceeds Age	Comments
Regular attendance/punctual				
Transitions appropriately				
Follows directions				
Listens attentively				
Stays on task				
Works independently				
Inquisitive/shows interest in learning				
Accepts correction				
Follows classroom rules				
Participates in classroom activities				
Stays focused to complete tasks				
Uses age appropriate fine motor skills				
Participates at clean up time				

Self-Help Skills	Developing	Age Appropriate	Exceeds Age	Comments
Independent in bathroom				
Manipulates clothing				
Eats independently				

Communication Habits	Developing	Age Appropriate	Exceeds Age	Comments
Speaks clearly enough to be understood				
Communicates well with others				
Expresses self in full sentences				
Ask questions when needed				
Vocabulary development				

Social/Emotional Development	Developing	Age Appropriate	Exceeds Age	Comments
Shares with peers				
Plays well with peers				
Demonstrates self-confidence				
Demonstrates polite/positive attitude				
Respects the feelings of others				
Works well in small groups				
Works well in large groups				
Demonstrates self-control				
Demonstrates appropriate behavior				

Applicant Strengths:

Please list any special circumstances which may be relevant to the applicant's performance in school:

Describe the applicant's parental involvement.

Please list any type of support the student might need to reach their full potential:

Has the student ever received any testing/evaluation:

Is there any additional information that can be better conveyed in a phone conversation? 🛛 Yes 🛛 No 🦳 Phone number:	there any additional information that can be better conveyed in a phone conversation	? 🛛 Yes	🛛 No	Phone number:	
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I recommend this student: 🛛 Enthusiastically 🖓 Confidently 🖓 With reservation 🖓 Not at this time

TEACHER INFORMATION

Name and position of person completing this form (please print):	
Teacher Email:	
School Name:	Phone Number:
Signature:	Date:
	Bate:

Your cooperation and candor are sincerely appreciated. To ensure confidentiality, please return this form directly to the Office of Admission, Frederica Academy, 200 Murray Way, St. Simons Island, Georgia 31522. You may also scan and email to helenrentz@fredericaacademy.org.