



**Cristo Rey Jesuit High School**

ADMISSIONS OFFICE

420 South Chester Street – Baltimore, MD 21231

[admissions@cristoreybalt.org](mailto:admissions@cristoreybalt.org)

(410) 727-3255 – office (443) 573-9886 - fax

**Student Recommendation Form**

**PARENTS/GUARDIANS** Please complete this section and then give the form to one of your child's **CORE** subject teachers to be completed and forwarded directly to our admissions office.

Student's Full Name \_\_\_\_\_

Home Address \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Parent/Guardian Cell Telephone # \_\_\_\_\_

Parent/Guardian Signature (*permission for release*)

Parent/Guardian Name (*please print*)

Date of Signature

**SCHOOL OFFICIAL** Please complete and sign this section of the form. Feel free to attach additional sheets of paper if responding in depth to any portion of this section. **INFORMATION ON THIS FORM WILL REMAIN CONFIDENTIAL AND WILL NOT BE SHARED WITH PARENTS.** Forward this form directly to the Cristo Rey Jesuit Admissions Office (see contact information above).

What are the first three words that come to your mind when you think of this student? \_\_\_\_\_

**Academic Ability**

	<i>Outstanding</i>	<i>Above Average</i>	<i>Average</i>	<i>Below Average</i>
Verbal ability				
Mathematical ability				
Creative ability				
Intellectual curiosity				
Ability to grasp new concepts				

*Please comment on this child's academic strengths and areas of growth.*

**Classroom Performance**

	<i>Outstanding</i>	<i>Above Average</i>	<i>Average</i>	<i>Below Average</i>
Classroom achievement				
Participation in discussions				
Writing mechanics				
Quality of written ideas				
Oral expression				
Work habits				
Ability to follow directions				
Preparation for class				

*Please comment on this child's learning style. Please also note any special needs and any observed discrepancies between academic ability and classroom performance.*

**Personal Abilities**

	<i>Outstanding</i>	<i>Above Average</i>	<i>Average</i>	<i>Below Average</i>
Maturity for grade				
Maturity for age				
Perseverance				
Self-confidence				

Student Name: \_\_\_\_\_

**School Behavior**

	<i>Outstanding</i>	<i>Above Average</i>	<i>Average</i>	<i>Below Average</i>
Motivation				
Ability to work in a group				
Ability to work independently				
Response to suggestions and corrections				
Willingness to seek needed help				
Attention span				
Interaction with peers				
Respect to others				
Conduct				

Please comment on any noteworthy aspect of the student's school behavior or social and emotional development.

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Please provide any information about the student's academic needs. \_\_\_\_\_

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Please note any special attributes of this student that would help us better understand him/her (e.g., community service; English as a second language; special talent in arts or athletics; etc.).

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Please describe the parents'/caregivers' involvement in the student's education and/or school. \_\_\_\_\_

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**RECOMMENDATION (please check one)**

- One of the Top Students I Have Encountered       Recommend  
 Recommend Highly       Cannot Recommend  
 Recommend Confidently       Please call me; I wish to provide more information

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**Evaluator's Name (printed)** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Position Title** \_\_\_\_\_ **School** \_\_\_\_\_

**Email Address** \_\_\_\_\_ **Telephone Number** \_\_\_\_\_

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