CAFE FEAR ACADEMY
ELEMENTARY YEARS TEACHER RECOMMENDATION

Applicant Name ___________________________________________ Grade applying for __________

Please answer the following questions based on your personal observation and experience.

Thank you for returning this as soon as possible. All information on this recommendation is confidential.

How long have you known this student and in what capacity? ________________________________

<table>
<thead>
<tr>
<th>Does the student:</th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>Show eagerness to learn</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Interact easily with others</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Follow directions given in a group</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Follow directions given individually</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Show self-confidence</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Exhibit self-control</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Display age-appropriate maturity</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Listen attentively for appropriate time</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Performs at developmental/grade level academic standards</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Please elaborate as needed on any 1s or 2s above. __________________________________________

Please identify a social, emotional, behavioral, or academic area of strength for this student.

________________________________________________________________________________________

What special interests or affinities does this student display? _________________________________

________________________________________________________________________________________

In what area(s) might we set goals to help this child be successful in school?

________________________________________________________________________________________
To your knowledge, has this child ever been evaluated by an outside source for learning difficulties or emotional problems? Yes _____________ No _____________ Do not know _____________
If YES, please explain and give dates if available.__________________________________________________

Realizing that Cape Fear Academy offers a challenging academic curriculum, do you recommend this candidate? (Check one please):
Enthusiastically _____ With reasonable confidence _____ With reservations _____ Do not recommend _____
Please explain as needed.________________________________________________________________________________________________________

In relation to students of the same age you have known, please indicate your rating below:
(Check one in each row please.)

<table>
<thead>
<tr>
<th></th>
<th>Outstanding</th>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>As a student:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>As a classroom citizen:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional Remarks:
________________________________________________________________________________________________________
________________________________________________________________________________________________________

Teacher Name: _____________________________ Date: ______________________
Job Title: ________________________________
School Name: _____________________________ Phone Number: ______________________
School address: ____________________________________________________________
Email: ________________________________________________________________

Thank you for sharing your insights and observations.

Please return via mail, email, or fax directly to:

The Admission Office
Cape Fear Academy
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Wilmington, NC 28412
www.capefearacademy.org
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nelda.nutter@capefearacademy.org