



MATH TEACHER RECOMMENDATION

TO THE APPLICANT

This section is to be completed by a parent of the student applicant. After completing the information below, please bring this form to the applicant's current Math teacher. This form must be returned by the school in an officially sealed school envelope. Recommendations returned by a parent or student will not be accepted.

Student's name _____

Last

First

Middle

Home address _____

Street

City

State

Zip

Email address _____ Home phone: (_____) _____

School Now Attending: _____

Name of School

City

Date Entered Current School (Month/Year) _____ / _____

TO THE MATH TEACHER

This form is to be completed by a school official (applicant's current Math teacher) and returned directly to Chaminade by **January 28, 2017**. This CONFIDENTIAL evaluation will be used only by persons on the Admissions Committee and will not become part of the student's cumulative folder. Therefore this form will not be open to general review and will not be forwarded to any other school or institution. Your carefully considered judgment will have a strong and direct bearing on this student's acceptance.

| STUDENT RATING <input type="checkbox"/> | Excellent | Good | Average | Poor |
|---|-----------|------|---------|------|
| Motivation | | | | |
| Sense of Responsibility | | | | |
| Personal Relationships | | | | |
| Initiative and Leadership | | | | |
| Cooperation | | | | |
| General Conduct/Effort | | | | |
| Work and Study Habits | | | | |

Current Math Course: CC Math 8 Pre-Algebra I Algebra IA (*one semester over school year*) Algebra I (*full year*)
 Algebra I Honors Geometry Geometry Honors Other: _____

Is the math curriculum at your school Common Core aligned? Yes No Partially (Explain below)

What level of math would you recommend the student take at Chaminade?: Algebra I Algebra I Honors Geometry
 Geometry Honors Algebra II Algebra II / Trigonometry Honors Other: _____

Please comment on the above ratings and provide any additional information that may be helpful in evaluating this student:

| RECOMMENDATIONS <input type="checkbox"/> | Strongly Recommend | Recommend | Recommend with Reservations (Please explain) | Do Not Recommend (Please explain) |
|--|--------------------|-----------|--|-----------------------------------|
| Academically | | | | |
| Character and Personal Promise | | | | |
| Overall | | | | |

Please provide additional information below, if "Recommend with Reservations" or "Do Not Recommend" was marked.

Is there any additional information that you think might or should influence our decision?

Name of Math Teacher Completing Evaluation:

Print Name *Title*

Signature *Date*

This form must be returned, by the school in an officially sealed envelope, no later than January 28, 2017 to:

Esther Bonino-Bennett
Director of Admissions
 Chaminade College Preparatory
 7500 Chaminade Avenue
 West Hills, CA 91304