

# TEACHER RECOMMENDATION



**Parkland Lutheran School**  
 120 123<sup>rd</sup> Street South Tacoma, WA 98444  
**Phone: (253) 537-1901**  
**Scan and Email: bsorn@parklandlutheran.org**

The school named below has my permission to answer the following questions regarding:

Applicant's Name: \_\_\_\_\_ Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**Most Recent Teacher:** The student named above is an applicant for admission to Parkland Lutheran School. In order to give the candidate a full review, we ask that you provide the following information. **This form should be returned in a sealed envelope or scanned and emailed to address above. All information will remain confidential.** Thank you for your cooperation.

School: \_\_\_\_\_ Telephone: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_ Subject Area: \_\_\_\_\_

Length of time the student has attended your school: \_\_\_\_\_

Current Grade Level: Grade \_\_\_\_\_

Suggested placement for the coming school year: Grade \_\_\_\_\_

Has the student ever been recommended for, or identified as needing:

- a. Psychological Testing      Yes \_\_\_\_\_      No \_\_\_\_\_
- b. Special Education          Yes \_\_\_\_\_      No \_\_\_\_\_
- c. Gifted Program              Yes \_\_\_\_\_      No \_\_\_\_\_
- d. Grade Retention            Yes \_\_\_\_\_      No \_\_\_\_\_
- e. Tutoring                      Yes \_\_\_\_\_      No \_\_\_\_\_

Rate the following areas:	5 (Excellent)	4 (Good)	3 (Average)	2 (Below Avg.)	1 (Poor)
Reading					
Math					
Spelling					
Follows Directions					
Grasps Concepts					
Homework Quality					
Homework Timeliness					
Respect for Classmates					
Responsibility					
Student Interaction w/Others					
Conduct					
Parental Involvement					

Number of days absent during this school year \_\_\_\_\_

Has the child ever been suspended or expelled? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

I recommend this applicant for admission to Parkland Lutheran School:  
                     **Without reservation**
                     **With reservation**
                     **Do not recommend**

Please use the back of this form for any additional information that would be helpful.

Signed \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

