

Alliance Christian Academy Student Recommendation Form

The student below is applying for admission to Alliance Christian Academy. All information is confidential, is not available to students or parents; and is used only for the admission process.

Student's Name: _____

Date: _____

Person Giving Recommendation: _____

How long have you known this student? _____ In what capacity? _____

Academic Qualities

	Excellent	Above Average	Average	Below Average	Don't know
Attendance (not frequently tardy or absent)					
Ability to work independently					
Ability to work in group					
Ability to express ideas verbally					
Ability to express ideas in writing					
Ability to organize					
Completion of work assigned					
Study habits					

Please comment on this student's academic strengths/weaknesses.

Please comment on this student's parental educational support/expectations and any special needs.

Personal Qualities

	Excellent	Above Average	Average	Below Average	Don't know
Honesty					
Responsibility					
Maturity					
Leadership					
Respect for peers					
Respect for adults					
Attitude					

Please comment on this student's character and social development.

Please choose one of the following statements regarding your recommendation of this student for admission to ACA:

Recommendation

	Highly recommend this student	Recommend this student	Recommend with reservations	Not recommend	Would like to further discuss this student by phone. Please call me at: () -
I would					

*We truly appreciate the time you have invested in this student's application. Your comments are valued. Recommendations may be mailed to **Alliance Christian Academy, PO Box 681423, Franklin, TN 37068** or emailed to **ACAdirectoremail@gmail.com***