



**CHRIST
CLASSICAL**
ACADEMY *of* CHARLOTTE

10132-A Harrisburg Rd. • Charlotte, NC 28215 • 704-549-4101

CONFIDENTIAL TEACHER RECOMMENDATION: TK-2ND GRADE

This form should be completed and returned by the teacher directly to CCA Admissions Office by email or mail.

Parents: Please complete this section and deliver this form to your child's teacher.

Student Name: _____ **DOB:** _____

Please read and sign the statement below:

As the parent/guardian of _____, I acknowledge that I waive my right to read the confidential teacher recommendations.

Parent Name (Printed): _____ **Phone:** _____

Parent Signature: _____ **Today's Date:** _____

Teacher(s): Your help in filling out this form will help Christ Classical Academy make the best fit decision in providing education for this child. This recommendation will remain confidential and will not become part of the child's academic record. We sincerely appreciate your cooperation.

Teacher Name (Printed): _____ **Date:** _____

Teacher Signature: _____ **Title:** _____

Your school name: _____ Student attends how many days per week? _____

How long have you known the applicant? _____ In what capacity? _____

What are the student's strengths? _____

What areas are there for improvement? _____

STUDENT CHARACTERISTICS

	OUTSTANDING	GOOD	FAIR	UNACCEPTABLE
Forms friendships easily	4	3	2	1
Respects and cooperates with adults	4	3	2	1
Follows multi-step directions	4	3	2	1
Shows eagerness to learn	4	3	2	1
Shows empathy for others	4	3	2	1
Able to work/play independently	4	3	2	1
Focuses in a classroom setting	4	3	2	1
Follows classroom rules/routines	4	3	2	1
Able to make transitions	4	3	2	1
Demonstrated creativity	4	3	2	1
Exhibits self confidence	4	3	2	1
ADDITIONAL TK QUESTIONS:				
Separates easily from parents	4	3	2	1
Knows basic shapes, letters, numbers	4	3	2	1

COMMENTS: _____
