



# Hamilton Heights Christian Academy

## STUDENT RECOMMENDATION FORM

### To Parent(s) or Guardian(s):

A recommendation form is required from school personnel for admission. Complete the section below and send to the appropriate recommender. The recommender will mail this form directly to HHCA Office. Recommendations become the confidential property of Hamilton Heights Christian Academy and are not subject to applicant, parent, or guardian review.

Parent or Guardian Signature

Applicant's Name (Please Print)

Address

City

State

Zip

Admission for what grade?

For what school year?

### To Teacher and / or Other School Personnel:

The above named student has made application to Hamilton Heights Christian Academy and has submitted your name as a recommender. Please complete this form and mail it to the Admissions Office at Hamilton Heights Christian Academy. This information will be kept strictly confidential. In relation to others in the candidate's age group whom you have known, please check the appropriate box for each item below. Leave blank where "not observed" applies:

### FOR ACADEMIC PROMISE (Please check appropriate recommendations)

Not Recommended

Recommended with reservations

Recommended

Top 5 - 10% This year

Exemplary Student

ACADEMIC QUALITIES	Excellent	Above Average	Average	Below Average	Needs Improvement
Academic Potential					
Academic Achievement					
Reading Skills					
Written Expression					
Oral Expression					
Mathematics Skills					
Study Habits					
Initiative/Motivation					
Creativity					
PERSONAL QUALITIES	Excellent	Above Average	Average	Below Average	Needs Improvement
Reaction to Criticism					
Leadership					
Self-Discipline					
Judgement					
Peer Compatibility					
Conduct					
Integrity					
Appearance					
Dependability					
Emotional Maturity					
Attitude					
Respect for Authority					
Independence					

**FOR CHARACTER AND PERSONAL PROMISE (Please Check Appropriate Recommendation)**

Not Recommended     Recommended w/reservations     Recommended     Top 5 - 10% This year     Exemplary Student

1. How long have you know the applicant? \_\_\_\_\_

Principal     Current Teacher     Former Teacher     Other: \_\_\_\_\_

2. To your knowledge, has the applicant had any history of physical or emotional problems?     yes     No

Any serious conduct problems?     yes     no

3. Has the applicant ever been suspended?     yes     no                      Expelled?     yes     no

If yes, explain: \_\_\_\_\_

4. To your knowledge, has the applicant had any history of involvement with tobacco, drugs, alcohol, or juvenile delinquency?

yes     no                      If yes, explain: \_\_\_\_\_

5. Has the applicant ever received professional psychological testing or counseling?     yes     no     don't know.

If yes, explain: \_\_\_\_\_

6. Has this applicant ever been in a program for special needs (i.e., learning disability, behavior disorder, gifted, etc.)?

yes     no                      If yes, explain: \_\_\_\_\_

7. Would the applicant be permitted to re-enroll at your school?     yes     no

If no, explain: \_\_\_\_\_

8. Please give any additional comments on the applicant's outstanding talents / achievements, family situation, or other pertinent information you may know:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

We wish to thank you for the time and effort you have invested in completing this confidential evaluation.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Mail Directly To:**                      Hamilton Heights Christian Academy  
2201 Hickory Valley Road  
Chattanooga, TN 37421