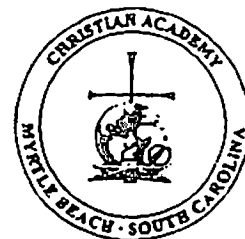


Teacher Recommendation Form

Christian Academy



NAME OF APPLICANT _____
 POSITION DESIRED _____

APPLICANT'S WAIVER OF RIGHT TO ACCESS CONFIDENTIAL STATEMENT: I hereby, freely and voluntarily, waive my right of access to any information contained on this recommendation form and agree that the statement shall remain confidential.

 Signature of Applicant

 Date

The person whose name appears above has filed for application for a position with Christian Academy. Please give us your opinion of this applicant's personal and professional qualifications. Federal legislation gives the applicant access to education records, including recommendations, unless the applicant has signed the waiver printed above. Thank you for your assistance in providing this assessment.

RECOMMENDATION APPRAISAL OF APPLICANT'S QUALITIES FOR THE ABOVE POSITION.

Performance Area	Outstanding (5 Points)	Strong (4 Points)	Average (3 Points)	Fair (2 Points)	Poor (1 Point)
Communication Skills					
Enthusiasm					
Creativity					
Work Ethic					
Self-Confidence					
Organizational Skills					
Knowledge of Content					
Teaching Practices					
Discipline Strategies					
Developmental Knowledge of Students					
Knowledge of Learning					
Special Programs					

Signature _____

Date _____

Address _____

Work Phone _____

Home Phone _____