

CURRENT *Administrator* RECOMMENDATION (Grades 6-12)



Applicant's Name _____ Applying for Grade _____ in Fall 20 _____

▶ **To the Administrator:** The above student has applied to Tarbut V'Torah Community Day School (TVT). TVT is a co-educational Jewish day school for students who are motivated and are of good character. Your completion of this recommendation is extremely helpful.

It is important to us that the student's next school placement be an appropriate one for both the student and family. Please complete this form below and return it to the admissions office. Your judgments will be used solely for the admissions process. **This recommendation will remain confidential and will not become a part of the student's permanent record.** Feel free to photocopy your completed recommendations for your files. We sincerely appreciate your cooperation and candor.

No Opportunity to Observe	Applicant Information	Excellent	Good	Average	Fair	Poor
<input type="checkbox"/>	Academic achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Consideration of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Interaction with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No Opportunity to Observe	Family Information	Excellent	Good	Average	Fair	Poor
<input type="checkbox"/>	Communication with school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Attendance at school functions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Cooperation with school rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Cooperation with faculty/administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Fulfillment of financial responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Participation in school community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Participation in child's education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Founded in loving memory of Naomi Gelman Weiss

Is this applicant a recipient of a special services program?

Gifted	<input type="checkbox"/>	Preferential seating	<input type="checkbox"/>
Modified curriculum	<input type="checkbox"/>	Extended time	<input type="checkbox"/>
Psycho-educational evaluation	<input type="checkbox"/>	IEP, 504, etc.	<input type="checkbox"/>
Extra help or tutoring	<input type="checkbox"/>	Assistive technology	<input type="checkbox"/>
Learning disability resource center	<input type="checkbox"/>	N/A	<input type="checkbox"/>

If yes, please explain:

How long have you known this student and in what capacity?

Has this student ever been subject to any disciplinary action while attending your school? If yes, please explain.

Please share with us your observation about this student's academic ability and work habits.

Please share with us your observation about this student's relationships with peers, classroom behavior, attitude and emotional maturity.

Please comment on anything additional that would be beneficial for us to know about this student.

Please comment on the parents' expectations for their child. Please explain the way in which the family supports their child and the policies of your school.

Is there any additional information that can be better conveyed in a phone conversation?Yes ____No____

If necessary____

Hours and phone number where you can be reached _____

Administrator's name _____

School _____ Email _____

Signature _____ Date _____

I recommend this student	Not at All	With Reservation	Mildly	With Confidence	Enthusiastically
Academic ability and promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character and personal promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please send this recommendation via mail, fax or email to:
Tarbut V'Torah Community Day School
Admissions Office
5 Federation Way, Irvine, CA 92603
Phone (949) 509-9500 • Fax (949) 509-7866
admissions@tarbut.com

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