

SHARED TEACHER RECOMMENDATION

Early Childhood PK2 and PK3

Name of Applicant _____

Application for Grade _____

Parent or Guardian

Parent or Guardian: Please write your child's name in the space above, read and sign the following before giving this to your child's teacher. Please provide them with the email address of The Village School admissions@thevillageschool.com. If for any reason they cannot scan and send electronically, please include an addressed/stamped envelope for The Village School ATT: Admissions, 2005 Gentryside Drive, Houston, TX, 77077, USA.

I understand and agree that the information contained on this Teacher Recommendation form is confidential and will be used only in the selection of applicants and will not become part of the applicant's permanent file. I also agree that this completed form will not be available to applicants, parents, or anyone outside of the Admissions Committee, and I waive any right that I may have to see it.

Signature of Parent or Guardian _____ Date _____

Teacher

Teacher: Please complete this confidential form and return it to The Village School at admissions@thevillageschool.com If for any reason you cannot scan and send electronically, please mail to for The Village School ATT: Admissions, 2005 Gentryside Drive, Houston, TX, 77077, USA. In order to give you time to get to know the applicant better, we ask that you *not* complete this form *before December 1*. This Teacher Recommendation form will be treated confidentially and will not be shared with parents. Please retain the original copy for your files. Thank you for your cooperation and honesty. **The child's application cannot be processed until this form is received by the Admissions Office.**

<i>Ratings</i>	<i>Area of Strength</i>	<i>Age Appropriate</i>	<i>Progressing</i>	<i>Area of Concern</i>	<i>Comments</i>
Self-esteem					
Cooperative attitude					
Responds to guidance/limits					
Follows simple verbal directions					
Follows familiar routines					
Makes transitions easily					
Self-motivating					
Separation from parents/caregivers					
Interaction with peers					
Interaction with teacher					
Beginning to take turns					
Beginning to share					
Labels feelings					
Speech is at least 50% intelligible					
Displays curiosity					
Ability to sustain engagement in an activity					
Shows interest in new activities					
Listens and participates in story or group time					

Describe any notable social or emotional strengths or weaknesses. What steps have been take to address the areas of concern?

Name of Applicant _____

Application for Grade _____

Physical Development

<i>Ratings</i>	<i>Area of Strength</i>	<i>Age Appropriate</i>	<i>Progressing</i>	<i>Area of Concern</i>	<i>Comments</i>
Fine motor coordination (lacing, puzzles, etc.)					
Scribbles or draws with crayons and begins to imitate marks (e.g. a circle)					
Plays with materials of different textures					
Gross motor coordination					
Body/space awareness					
Balance, gait, fluidity, smoothness of movement					
Participates in physical games and activities					

Please describe any notable physical strengths or weakness: visual and/or auditory:

Are there any aspects of the child's physical development or stamina which might limit full participation in a school's program? If so, how does the child deal with them?

This application is: Strongly Recommended Recommended Recommended with Reservation Not Recommended

Check the words that best describe this applicant.

- | | | | |
|------------|-------------------|--------------|----------------|
| Aggressive | Courteous | Flexible | Over Protected |
| Articulate | Detached | Good Natured | Respectful |
| Cheerful | Determined | Impulsive | Serious |
| Confident | Easily Frustrated | Oppositional | Spirited |

- Is there anything regarding this applicant that would be helpful for the Admissions Committee to know?

- Is there anything regarding the family that would be helpful for the Admissions Committee to know?

I would: Like to Be willing to discuss this application by telephone.

Signature of Teacher: _____	Date _____
Print Name: _____	
Name of School: _____	Telephone: _____
School Address: _____	

Director/Principal

	Consistently	Usually	Seldom	Not Observed
Parent(s) participate in school activities				
Parent(s) support school policies and procedures				