



Teacher Recommendation Form (Grades 3-8)

Thank you for completing this recommendation form. We appreciate your accurate, thorough and candid responses. Information included on this form is kept confidential, and shared only with Vermont Day School staff.

Your Name: _____ Date: _____

School: _____ Position: _____

Phone: _____ Email: _____

Student's Name: _____ Grade: _____

How long have you known the student? _____

In what capacity (teacher, tutor etc.)? _____

Please describe the student's personality.

What are his/her strengths (consider academic, behavioral and social-emotional factors)?

What are his/her challenges (consider academic, behavioral, social-emotional factors)?

How does the student interact socially, with peers and adults?

Please rate the student on the following, to the best of your ability. Write N/A for any item that is not applicable.

Attributes and Behaviors	Exceptional	Above Average	Average	Below Average	Significantly Below Avg.
Initiative					
Responsibility					
Motivation					
Work independently					
Follows directions					
Flexibility					
Focus/concentration					
Handle transitions					
Organization					
Seek help when needed					
Class participation					
Work in small groups					
Self-confidence					
Emotional maturity					
Curiosity					

Please rate the student on the following, to the best of your ability. Write N/A for any item that is not applicable.

Academic Skills	Exceptional	Above Average	Average	Below Average	Significantly Below Avg.
Oral Expression					
Speech Intelligibility					
Listening Comprehension					
Overall Reading					
Decoding					
Fluency					
Comprehension					
Vocabulary Knowledge					
Overall Writing					
Handwriting					
Content/Ideas					
Spelling					
Sentence Structure					
Organization					
Writing Mechanics					
Overall Math					
Math Fluency					
Computation					
Math problem-solving					
Science					
Social Studies					
Art					
Music					
Physical Education					

Is there anything else you would like us to know? Please add any additional comments that would be helpful:

Signature: _____ Date: _____

Please send completed form to:

Vermont Day School
6701 Shelburne Road
Shelburne, VT 05482

Thank you for completing this recommendation form! Please contact us with any questions.

Vermont Day School admits students of any race, color, national origin, ethnic origin, sex, sexual orientation, gender identity and religion to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national origin, or ethnic origin in administration of its educational policies, admission policies, scholarship, and other school-administered programs.

