

SHENANDOAH VALLEY ACADEMY

234 W. Lee Hwy., New Market, VA 22844
 (540) 740-3161 • (540) 740-3336 (fax) • admissions@sva-va.org
 www.shenandoahvalleyacademy.org

ENGLISH TEACHER RECOMMENDATION

STUDENT NAME _____ is a candidate for admission to Shenandoah Valley Academy. Please complete this form to help us become better acquainted with the candidate. Your recommendation is confidential and will not be shared with the family. Please complete this form and return it to the Admissions Office at your earliest convenience. Thank you for your help.

1. How long have you known the applicant? _____
2. In what course(s) have you taught the applicant? _____
3. What is the average grade of the applicant in your courses(s)? _____
4. Briefly describe the type of writing assignments in your course(s). _____

5. In what other capacity, if any, have you known the applicant? _____

6. What words or ideas come to mind when describing the applicant? _____

7. What have been the applicant's major strengths in your courses(s)? _____

8. What have been the applicant's major weaknesses in your course(s)? _____

9. Was the applicant in a specialized class (slower-paced, pull-out, ESL, Special Ed, etc.)? Describe:

10. Did the applicant receive any *accommodations* to complete the class? Specify

11. How would you rate the applicant on the following?

	Excellent	Good	Average	Below Average	Poor	N/A
Academic potential						
Initiative						
Reaction to setbacks/criticism						
Acceptance of responsibility						
Personal integrity						
Emotional stability						
Relationship to adults						
Relationship to peers						
Maturity						
Creativity						
Sense of humor						

SPECIFIC ENGLISH INFORMATION

	Excellent	Good	Average	Below Average	Poor	N/A
Reading rate						
Reading comprehension						
Grammatical usage						
Knowledge of vocabulary						
Usage of vocabulary						
Writing ability						
Writing creativity						

12. All things considered, how would you rate the applicant?

	Excellent	Good	Average	Below Average	Poor	N/A
As a student						
As a person						
Overall						

13. Please advise us of any behavioral problems you have experienced with this student in your classroom?

14. Please add any information you feel would be pertinent to this applicant's admission to Shenandoah Valley Academy.

Name (please print) _____

School _____

School Address _____

Telephone _____

Signature _____ Date _____