



CONFIDENTIAL STUDENT RECOMMENDATION FORM

COVENANT CHRISTIAN SCHOOL

1855 Orange-Olive Road

Orange, CA 92865

714-998-4852

www.covschool.org

Instructions to Parents: Please complete the *applicant information only*, then give form to your child's current school. Ask the school to complete it and mail the completed form directly to Covenant Christian School at the address above.

APPLICANT INFORMATION

Name: _____ Applying for Grade: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Current School: _____ Phone: _____

Parent's Name: _____ Parent's Signature: _____

Instructions to Teacher: The student named above has applied for admission to Covenant Christian School, Orange. Please have this form completed by the teacher who knows the student best. Please mail the completed form directly to Covenant Christian School at the above address. Do not return to the applicant or the applicant's parent.

	3	2	1	Rating
ACADEMIC ABILITY	Exceptional	Average	Below average	
HOMEWORK RESPONSIBILITY	Always in on time	Mostly in on time	Often missing	
READING COMPREHENSION	Above grade level	Grade Level	Below Grade Level	
WORK ETHIC	Works independently	Usually on task	Frequently off task	
ATTENDANCE	Outstanding	Average	Unsatisfactory	
PEER RELATIONSHIPS	Highly Respected	Age appropriate	Struggles with others	

Any known and diagnosed learning difficulties? Yes _____ No _____

If Yes, please explain: _____

Does the family meet their financial responsibilities (if applicable)? Yes _____ No _____ N/A _____

RECOMMENDATION: (Please check one)

____ Recommend highly ____ Recommend ____ Recommend with reservation ____ Do not recommend

Comments: _____

Signature _____ Title _____ Date _____