



## St Luke's Academy

### STUDENT RECOMMENDATION FORM

#### **Confidential Recommendation Form**

Name of Applicant: \_\_\_\_\_ Age: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_ (d) \_\_\_\_\_ (m) \_\_\_\_\_ (yr)

Current Grade/ Class Level: \_\_\_\_\_

Name of School currently or most recently attended: \_\_\_\_\_

School Address: \_\_\_\_\_

RECOMMENDER'S FULL NAME: \_\_\_\_\_ DESIGNATION: \_\_\_\_\_

CONTACT DETAILS: PHONE NUMBER/S: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

HOW LONG HAVE YOU KNOWN THE APPLICANT? \_\_\_\_\_ IN WHAT CAPACITY? \_\_\_\_\_

TO THE PERSON RECOMMENDING:

The student whose name appears above is applying for admission to St Luke's Academy. Please provide us with an honest assessment to help us evaluate this student's application. This document is strictly confidential.

	Above Average	Average	Below Average	*Needs Development
Intellectual Ability				
Oral Communication Skills				
Written Communication Skills				
Problem Solving Skills				
Ability to listen				
Ability to focus				
Respect & Concern For Others				
Requisite Collaborative Skills				
Punctuality and Attendance				
Effort in subjects				
Respect for school property				
Attention in class				
Self-Control				
Deportment & self-image				
Courtesy				
Athletic Ability				
Swimming Ability				
Presentation Of Work				
Participation in group activities				
Understanding Mathematical concepts				
Phonics & Reading Comprehension				

\*In the event "Needs Development" is checked for any of the areas above, please give details. On the additional lined sheet provided.

**Please list first adjective / phrase that comes to mind to describe this child**

**Please comment on the child's academic strengths / challenges, learning styles and social interactions with other children and adults.**

**Has the applicant ever been involved in any disciplinary case? Yes / No**

**If yes, please explain.**

**PARENT INVOLVEMENT AND COOPERATION:**

\_\_\_\_ Very \_\_\_\_ Usually \_\_\_\_ Rarely \_\_\_\_ Not Involved \_\_\_\_ Don't Know

**Have the parents/ guardians paid their tuition fees on time? Yes / no**

**Did the parents/guardians leave owing any funds to the school? Yes / no**

**OVERALL RECOMMENDATION:**

\_\_\_\_ Strongly Recommended \_\_\_\_ Recommended \_\_\_\_ Recommended with Reservation

\_\_\_\_ Not Recommended

Please state your reasons \_\_\_\_\_

*Please sign this form below and return it to [office@stlukesacademy.com](mailto:office@stlukesacademy.com) or mail in to Admissions, St. Luke's Academy, White Hall, St. Peter, Barbados, BB26015*

*Thank you for taking the time to complete this recommendation form.*

RECOMMENDER'S SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_ (d) \_\_\_\_ (m) \_\_\_\_ (yr)

*St Luke's Academy School admits students of any race, religion, national and ethnic origin 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, colour, religion, national or ethnic origin in administration of its education policies, and other school-administered programs.*

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