



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 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.

Additional Comments Form