

THE GOOD HOPE SCHOOL
 170 ESTATE WHIM
 FREDERIKSTED, VI 00840



TEACHER RECOMMENDATION FORM

Name of Student: _____

Address: _____

Teacher: The Good Hope School finds candid recommendations helpful in choosing from among highly qualified candidates. We are grateful for the time that you will be giving to the completion of this form. Please ensure that this form is returned to: Office of Admission, The Good Hope School, 170 Estate Whim, Frederiksted, VI 00840.

Name of Teacher (Please print): _____ Phone #: _____

Subject: _____

School: _____

How long have you known the candidate and in what capacities? _____

Ratings: Compared to other students you have taught, check how you would rate this student in terms of academic skills and potential.

No Basis	Below Average	Average	Good (above average)	Very Good (well above average)	Excellent (top 10%)	One of the top few encountered in my career
_____ Creative, original thought	_____	_____	_____	_____	_____	_____
_____ Motivation	_____	_____	_____	_____	_____	_____
_____ Independence, initiative	_____	_____	_____	_____	_____	_____
_____ Intellectual ability	_____	_____	_____	_____	_____	_____
_____ Academic achievement	_____	_____	_____	_____	_____	_____
_____ Written expression of ideas	_____	_____	_____	_____	_____	_____
_____ Effective class discussion	_____	_____	_____	_____	_____	_____
_____ Disciplined work habits	_____	_____	_____	_____	_____	_____
_____ Potential for growth	_____	_____	_____	_____	_____	_____
_____ Character, integrity	_____	_____	_____	_____	_____	_____
Overall Recommendation	_____	_____	_____	_____	_____	_____

Please use the back of the page for further comments.

Signature _____ Date _____