

Judaic Studies Teacher Recommendation

To the Applicant: Please fill in your name and the grade to which you are applying. Submit this form to your *current* Judaic Studies teacher along with a pre-addressed envelope to Schechter Westchester (be sure to include postage).

Name of Applicant

Applying for Grade

To the Teacher: The student whose name appears above is applying to Solomon Schechter School of Westchester. In the selection of students, the Admission Committee considers character and personality traits, as well as scholastic achievement. Your candid appraisal of the candidate's qualifications will aid us in the selection and placement of students. This recommendation will be kept strictly confidential and will be made available only to admission and guidance officers of the School. Thank you for your cooperation.

Name of Course: _____

Course Description: _____

What grade is the student receiving at this time? _____

Do you believe this student is working up to his/her potential? ___ Yes ___ No

Please explain: _____

Please list texts used in your course:

Write two to three sentences that describe this student:

What advice would you give next year's teacher to help ensure that this student's needs are met?

	Excellent	Better than Expected	As Expected	Below Expectations	I Don't Know
Reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain: _____					
Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain: _____					
Home Assignments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain: _____					
Text Analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain: _____					
Abstract Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain: _____					
Consistency of Academic Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain: _____					
Focus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain: _____					
Respect Toward Self and Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain: _____					
Following directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain: _____					
Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain: _____					
Facility with Hebrew	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain: _____					

Name of Teacher _____ **Title** _____

Name of School _____ **Telephone** _____

School Address _____

Signature of Teacher _____ **Date** _____

Please return to:

**Office of Admissions
Solomon Schechter School of Westchester
555 West Hartsdale Avenue
Hartsdale, NY 10530
(914) 948-7979 (fax)**