



## Recommendation Form – Math Teacher

\_\_\_\_\_  
Name of Student

\_\_\_\_\_  
Current Grade

The student named above is applying to University School of the Lowcountry ([www.uslowcountry.org](http://www.uslowcountry.org)). University School is geared to above-average students and seeks the curious, self-motivated learner who thrives in a flexible yet challenging academic environment and exhibits most of the following characteristics:

- \* The desire to attend a challenging school and the willingness to develop one's abilities
- \* Strong academic history
- \* Strong achievement
- \* Curiosity, independence, and motivation
- \* High intellectual potential

A full report from the applicant's present school is necessary if he or she is to be given consideration for admission. Our ability to effectively evaluate this student is helped considerably by your timely and candid insights. All information that you furnish will be kept confidential to the extent the law allows and will not be retained as a part of the student's permanent record. On behalf of this student, we thank you for your cooperation.

Your name \_\_\_\_\_ Title \_\_\_\_\_

School \_\_\_\_\_

How long have you known the student? \_\_\_\_\_

Student/teacher ratio in your classroom: \_\_\_\_\_

What are the first three words that come to mind to describe this student?

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

### COURSE DESCRIPTION

Title \_\_\_\_\_

Are the mathematics courses at your school sectioned according to ability?  Yes  No

If yes, please briefly explain how mathematics is sectioned at this grade level and note the section placement of the applicant

\_\_\_\_\_

How often and for how long does this class meet? \_\_\_\_\_

What text & instructional materials are used? \_\_\_\_\_

By the end of the school year, we will have completed \_\_\_\_\_ of \_\_\_\_\_ chapters.

What is the student's grade average? \_\_\_\_\_ What is the next course recommended for him/her? \_\_\_\_\_

Were the lessons supplemented by any of the following?

- Computer exercises
- Math competition outside of school
- Financial literacy / Economics
- Other \_\_\_\_\_

The items below ask for your sense of this student's emotional and social growth, intellectual development, and relationships within the school community. Please evaluate the student in the following areas by placing a check in the appropriate column.

**ACADEMIC QUALITIES**

	<b>Truly Outstanding</b>	<b>Excellent</b>	<b>Good</b>	<b>Average</b>	<b>Below Average</b>	<b>Comments</b>
Attitude towards subject	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Intellectual curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Academic performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Academic ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Ability to reason abstractly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Ability to think logically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Math competency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Creativity and imagination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Organizational ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Stays on task	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Willingness to take intellectual risks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Perseverance and thoroughness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Ability to work in a group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Seeks help when needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Class participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Study habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Engagement in personal Math-related endeavors for enjoyment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

**PERSONAL QUALITIES**

	<b>Truly Outstanding</b>	<b>Excellent</b>	<b>Good</b>	<b>Average</b>	<b>Below Average</b>	<b>Comments</b>
Honesty/integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Self-esteem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Self-discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Receptivity to others' ideas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Peer compatibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Relationship with teacher(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Sensitivity to others' feelings/ respect for individual differences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Reaction to setbacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Maturity (relative to age)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Sense of humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

What are the student's strengths

As a student? \_\_\_\_\_

As a person? \_\_\_\_\_

In which areas does the student need improvement

As a student? \_\_\_\_\_

As a person? \_\_\_\_\_

Does the student attend class regularly?  Yes  No      Is there are problem with tardiness  Yes  No

Comments \_\_\_\_\_

To the best of your knowledge, if the student missed a problem, it would have been caused by:

lack of effort       misreading a question       carelessness  
 problem too difficult       rarely an issue with this student       other \_\_\_\_\_ - \_\_\_\_\_

How well does the student accept advice or criticism? \_\_\_\_\_

Which words best describe the student's thinking?  Independent     Creative     Imitative     Other

Does this student have any particular interests or affinities you would like to share with us? \_\_\_\_\_

Within your range of experience, how would you rate the student?

Truly outstanding     Excellent     Good     Average     Below Average

Is there any additional information that would be helpful to us in our evaluation of this applicant? \_\_\_\_\_

### **PARENT-SCHOOL RELATIONSHIP**

Parents are an important part of our relationship with the student. To the best of your knowledge and with careful consideration to accuracy, please share with us any thoughts you have regarding this applicant's family, including their involvement with your school.

To your knowledge, is the parents' perception of their child compatible with the school's understanding of the child?

Please comment. \_\_\_\_\_

Are you aware of any family circumstances that affect the student's life at school? \_\_\_\_\_

Which word(s) best describe the parents in regard to their child?

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Please explain \_\_\_\_\_

Additional comments \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

If we have additional questions, may we contact you?  Yes  No

Phone number \_\_\_\_\_ Most convenient time to call is \_\_\_\_\_

Email address \_\_\_\_\_

**Thank you again for your time and the helpful information you have provided. If you have any questions about University School of the Lowcountry, please take a moment and look at our website ([www.uslowcountry.org](http://www.uslowcountry.org)). Please also feel free to call (843-884-0902) or email ([info@uslowcountry.org](mailto:info@uslowcountry.org)) with comments/questions.**

**SUBMITTING THE RECOMMENDATION**

Recommendations may be submitted in one of three ways:

- |   |   |
|---|---|
| 1) By mail, using the following address | 2) By fax, using the following phone number |
| University School of the Lowcountry     | University School of the Lowcountry         |
| P.O. Box 665                            | 843-884-0905                                |
| Mt. Pleasant, SC 29465-0665             |   |

- 3) Return to the applicant's parent/guardian for inclusion in the child's application packet  
*\* Please place the recommendation in an envelope, seal it, and write your signature across the seal.*

**Mission of University School of the Lowcountry ([www.uslowcountry.org](http://www.uslowcountry.org))**

University School is an independent, co-educational, non-sectarian school that offers a challenging and individualized curriculum. It fosters high academic achievement and emphasizes balanced growth - intellectually, physically, emotionally, ethically, and socially - for every student. Within a highly supportive community, University School is committed to maintaining a caring and creative environment that encourages children to love learning, take intellectual risks, self-advocate, treat others with respect and empathy, and aspire to make a positive difference in the greater community and world.

**Non-Discrimination Policy**

University School of the Lowcountry is committed to its growth as an institution that welcomes and values a diversified school community. The school does not discriminate on the basis of race, national or ethnic origin, religion, economic background, or any other classification protected by law in the administration of its educational policies, financial assistance policies, or any other school policy or program.