

# Centennial Christian School

1-206 Yong San Dong 2-ga, Yong San Gu  
 Seoul, South Korea 140-833  
 Tel: (02) 772-9275·6 · Fax: (02) 772-9272  
[www.ccslions.com](http://www.ccslions.com)



## Recommendation Request

Name of Applicant: \_\_\_\_\_

Applying for Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Present Grade: \_\_\_\_\_

*In relation to other students whom you have taught, please rate this child in the following areas:*

Academic Performance	Exceptional (top 2-3%)	Excellent (top 10%)	Above Average	Average	Below Average	Not Observed
<b>English/Language Arts</b>						
Oral Language Skills						
Quality of Writing						
<b>Mathematics</b>						
Math Facts/Computation Skills						
Math Concept Development						
Problem Solving Skills						
<b>Overall</b>						
Intellectual Curiosity						
Academic Achievement						
Motivation to Succeed						
Critical Thinking Skills						

Personal Behavior	Exceptional (top 2-3%)	Excellent (top 10%)	Above Average	Average	Below Average	Not Observed
<b>Study Habits</b>						
Attention Span						
Ability to Work Independently						
Organizational Skills						
Completes Homework						
<b>Personal Characteristics</b>						
Positive Influence						
Integrity and Honesty						
Respectful of Others						
Responsible and Self-Disciplined						

**Please Answer the Following Questions.**

1. How long have you known this applicant?
2. In what context?
3. What are the first words that come to mind when you describe this applicant?
4. Have you observed any behavior or disciplinary concerns?
5. Does the applicant receive any support outside the regular classroom? Please explain.
6. Any additional comments:
7. Do you recommend this student for acceptance?

\_\_\_\_\_  
Teacher's Name (Please Print)

\_\_\_\_\_  
Teacher's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
School

\_\_\_\_\_  
Subject Taught

\_\_\_\_\_  
Email Address