



Holy Family Academy

To the Truth through Faith and Reason
281 Cartier Street Manchester, NH 03102

School Recommendation Form

Thank you for helping your student apply to Holy Family Academy. Your early attention is requested since your recommendation is very important to us. Holy Family Academy provides a classical education in the Roman Catholic tradition for students in grades seven through twelve. We appreciate receiving your candid, confidential assessment of this student's strengths and needs. Thank you in advance for your kind assistance.

Student Name _____

Please rate the applicant regarding the following characteristics: (Check box)

	Not Observed	Below Average	Average	Good	Excellent	Truly Outstanding
Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation with Faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interaction with Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Skill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organizational Skill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to Criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading Skill	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>
Study Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Skill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please respond to the following questions regarding the applicant by checking the appropriate box.

1. Has any disciplinary action been taken concerning this student? Yes No
2. Has the student been involved with alcohol or drugs? Yes No
3. Does the student have any physical, social, or emotional limitations? Yes No

Please use the space below to comment on the student's strengths and/or particular needs or to clarify any items in the evaluation.

Check one: Recommend without reservation Recommend Do not recommend

Principal's/Headmaster's Name: _____

Parent/Homeschool Teacher's Name: _____

Signature: _____ Date: _____

School Name: _____

School Phone: _____

School Address: _____

Please return this form to:

Head of School
Holy Family Academy
281 Cartier Street
Manchester, New Hampshire 03102