

LETTER OF REFERENCE

To Parents:

This form is to be completed by a staff person at your child's current school or by another adult, not a family member, whom you believe knows your child well. Whomever you feel knows your child best is who should complete this recommendation ex: counselor, music teacher, principal etc.

The Admissions Committee cannot act until this information has been received. The staff member will mail the form directly to Brook Road Academy upon completion. The reference will be used only for the admission process.

To Current staff:

We greatly value the perspective of those professionals who work with our candidates on a daily basis. We appreciate your candid observations with the awareness that children are constantly maturing and developing. Your information is invaluable to us, and paired with our admissions evaluation, allows us to make a thoughtful enrollment decision. Your response on this form is for admission purposes only and will be kept confidential. Please mail this reference to the address below.

Student's Name			Age		
Staff's Name			School		
Dear Brook Ro	oad Academy	Admissions Repres	entative:		
		Please add an attachm	ent if additional space is i	needed	
		ricase add an attachin	iene ii duditional space is i	iccucu.	
			Please mail to:	Brook Road Academy	
Staff signature	Date			Attn: Admissions Dept 8000 Brook Rd. Richmond, Va. 23227	

5/11/2015



