



Village School

Middle School for Girls

Teacher Recommendation Form

Student: _____

Teacher: _____

Date: _____

Please use this form to answer the following questions about this student and be as candid as possible. We very much value your insights concerning this student. We will consider your comments seriously as a part of our decision making process.

Please describe how this student gets along with her peers.

Please describe how this student gets along with adults in the classroom. (Teachers, other staff members, parent volunteers, etc.)

Please describe any strengths that this student demonstrates; academic, artistic, social, athletic or other areas that you perceive as strengths.

Please describe any weaknesses that this student demonstrates which you feel warrant attention.

Please record the results of any informal reading inventories (word recognition and comprehension) or spelling inventories that have been administered to this student this year. Please include the name of the inventory and the date it was administered.

Please feel free to add any other thoughts you have concerning this child.

Thank you very much for your careful consideration and answer to each of these questions. Please send this form directly to Village School in the enclosed envelope or mail to:

Village School
215 East High Street
Charlottesville, VA 22902

If you have any questions please call Eliza O'Connell at 984-4404.

Sincerely,
Village School Staff