

STEAM ACADEMY AT BURKE MIDDLE SCHOOL
TEACHER RECOMMENDATION FORM

This form must be received in the STEAM Academy office no later than July 8, 2014.

Please complete this form and **MAIL** it to:
STEAM Academy
8101 Orange Ave., Pico Rivera, CA 90660

You may also **E-MAIL** this form to:
evargas@erUSD.org
Subject: Magnet Recommendation

Applicant's Name: _____

Please consider how the student compares to similar grade level students in ERUSD.

	No basis for judgment	Below Average	Average (Top 50% in ERUSD)	Good (Top 25% in ERUSD)	Excellent (Top 10% in ERUSD)	Outstanding (Top 5% in ERUSD)
Mathematics Ability	0	1	2	3	4	5
Science Ability	0	1	2	3	4	5
Writing Ability	0	1	2	3	4	5
Reading Comprehension	0	1	2	3	4	5
Critical Thinking Skills	0	1	2	3	4	5
Academic Motivation: initiative, pride in work, willingness to go above and beyond	0	1	2	3	4	5
Teamwork Ability	0	1	2	3	4	5
Organization and Work Habits	0	1	2	3	4	5
Citizenship/Behavior/Attendance	0	1	2	3	4	5

STEAM: Science, Technology, Engineering, Arts and Mathematics - is the broad umbrella for how the curriculum in this new and innovative program is organized. Students will tackle middle school concepts while incorporating the 4 Cs of 21st Century learning – critical thinking, communication, collaboration, and creativity, all through the STEAM lens of authentic, project-based instruction.

Do you recommend this student for the Magnet Program?

☐ Yes

☐ No

☐ With reservations

Please explain your recommendation, as well as any rankings below Excellent, as to why acceptance to the academy would be beneficial to the student.

Teacher's Name: _____ School: _____

Subject/grade you taught this student: _____ School year: _____

Signature: _____ Date: _____

In order for this application to be considered, this form MUST BE MAILED/E-MAILED directly to the STEAM Academy.

For questions regarding this application, contact the STEAM Academy at (562) 801-5059 or evargas@erUSD.org