

# Nativity School

5200 Johnson Street ▪ Hollywood, Florida 33021 ▪ (954) 987-3301 ext. 1 ▪ Fax: (954) 987-6368



## RECOMMENDATION FORM

Please send directly to the school by mail, fax, or email: [jbeane@nativitysch.com](mailto:jbeane@nativitysch.com).

Name of Student Candidate: \_\_\_\_\_ Applying for Grade: \_\_\_\_\_

I authorize the release of information requested on this recommendation form.

\_\_\_\_\_  
Parent Signature Date: \_\_\_\_\_

### **TO TEACHER OR PRINCIPAL:**

The above named student is seeking admission to Nativity School. We would appreciate your observations on the form below by checking the appropriate areas. If you would prefer to discuss this student personally rather than complete this form, please check here , sign the form, and note your telephone number.

1. Is the candidate in good standing and eligible to re-enter your school? YES \_\_\_\_\_ NO \_\_\_\_\_
2. Has major disciplinary action ever been necessary for this student? YES \_\_\_\_\_ NO \_\_\_\_\_
3. Has the candidate been involved with tobacco, alcohol, or drugs? YES \_\_\_\_\_ NO \_\_\_\_\_
4. Has the candidate ever been suspended or expelled from your school? YES \_\_\_\_\_ NO \_\_\_\_\_
5. Has the candidate any physical, social or emotional limitations? YES \_\_\_\_\_ NO \_\_\_\_\_
6. Do the parents meet their financial obligations? (if applicable) YES \_\_\_\_\_ NO \_\_\_\_\_
7. Do the parents support school policies? YES \_\_\_\_\_ NO \_\_\_\_\_

Further explanation (if necessary, use back of form): \_\_\_\_\_

Please rate the items below.	Excellent	Good	Fair	Poor
Academic Ability				
Conduct				
Integrity				
Relationship with Peers				
Relationship with Teachers				
Emotional Stability				
Initiative and Drive				
Recommendation as a Student				

Signature: \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_ Phone ( ) \_\_\_\_\_

*Thank you for your time in completing this recommendation form.  
Your prompt return of the form would be greatly appreciated.*