

RECOMMENDATION FROM CURRENT ENGLISH TEACHER

INSTRUCTIONS FOR APPLICANT

Fill in your full name below and give this form to your current English teacher. The form should be returned to our Office of Admissions.

Applicant's First Name Middle Last

INSTRUCTIONS FOR TEACHER

This student is an applicant for admission to The Piney Woods School. Please complete both sides of this form and return it to: The Piney Woods School, Office of Admissions, P.O. Box 69, Piney Woods, MS 39148-0069.

1. In what subjects and during which academic years have you taught the applicant? (Please indicate course and level.)

2. In what other capacities have you known the applicant?

3. In relation to others in the same age group whom you have known, please rate applicant in the following areas by placing an "X" on the appropriate line in each row.

ACADEMIC EVALUATION

	Outstanding	Excellent	Good	Average	Below Average	Poor	N/A
Academic potential	_____	_____	_____	_____	_____	_____	_____
Academic achievement	_____	_____	_____	_____	_____	_____	_____
Ability to work independently	_____	_____	_____	_____	_____	_____	_____
Imagination/ creativity	_____	_____	_____	_____	_____	_____	_____
Intellectual curiosity	_____	_____	_____	_____	_____	_____	_____
Clarity of writing style	_____	_____	_____	_____	_____	_____	_____
Oral expressions	_____	_____	_____	_____	_____	_____	_____
Effort / persistence	_____	_____	_____	_____	_____	_____	_____
Ability to hand in work on time	_____	_____	_____	_____	_____	_____	_____
Study habits	_____	_____	_____	_____	_____	_____	_____

PERSONAL EVALUATION

	Outstanding	Excellent	Good	Average	Below Average	Poor	N/A
Conduct	_____	_____	_____	_____	_____	_____	_____
Emotional stability	_____	_____	_____	_____	_____	_____	_____
Maturity	_____	_____	_____	_____	_____	_____	_____
Personal integrity	_____	_____	_____	_____	_____	_____	_____
Peer compatibility	_____	_____	_____	_____	_____	_____	_____
Relationship to adults	_____	_____	_____	_____	_____	_____	_____
Self-confidence	_____	_____	_____	_____	_____	_____	_____
Sense of humor	_____	_____	_____	_____	_____	_____	_____

Please comment on the following:

4. What course would you recommend this applicant take next year? _____

5. The applicant's ability to move from literal to figurative interpretations. _____

6. The applicant's ability to organize and communicate ideas verbally and in writing. _____

7. The applicant's ability to learn from his or her mistakes. _____

8. Are there particular strengths or weaknesses of which you feel the Admissions Committee should be aware? _____

9. Additional thoughts and comments are welcome. _____

10. If you have any reason to question the integrity of the applicant, please explain on a separate sheet of school letterhead.

I recommend this applicant for admission:

- enthusiastically strongly mildly with reservation not at all

Teacher's Signature

Date

Teacher's Name (please print)

Mailing Address

City/Town

State

Country

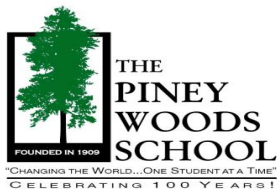
Zip

We appreciate the time and effort required to complete this evaluation. Your thoughtful comments will help us gain a better understanding of the applicant as an individual and as a student.

Please send me additional information about The Piney Woods School.

The Piney Woods School

Office of Admissions ♦ P.O. Box 100 ♦ Piney Woods, MS 39148 ♦ tel: (601) 845 – 2214, ext. 2223 ♦ fax: (601) 845 - 2604



RECOMMENDATION FROM CURRENT MATHEMATICS TEACHER

INSTRUCTIONS FOR APPLICANT

Fill in your full name below and give this form to your current Mathematics teacher. The form should be returned to our Office of Admissions.

Applicant's First Name _____ Middle _____ Last _____

INSTRUCTIONS FOR TEACHER

This student is an applicant for admission to The Piney Woods School. Please complete both sides of this form and return it to: The Piney Woods School, Office of Admissions, P.O. Box 69, Piney Woods, MS 39148-0069.

1. In what subjects and during which academic years have you taught the applicant? (Please indicate course and level.)

2. In what other capacities have you known the applicant?

3. In relation to others in the same age group whom you have known, please rate applicant in the following areas by placing an "X" on the appropriate line in each row.

ACADEMIC EVALUATION

	Outstanding	Excellent	Good	Average	Below Average	Poor	N/A
Academic potential	_____	_____	_____	_____	_____	_____	_____
Academic achievement	_____	_____	_____	_____	_____	_____	_____
Ability to work independently	_____	_____	_____	_____	_____	_____	_____
Imagination/ creativity	_____	_____	_____	_____	_____	_____	_____
Intellectual curiosity	_____	_____	_____	_____	_____	_____	_____
Clarity of writing style	_____	_____	_____	_____	_____	_____	_____
Oral expressions	_____	_____	_____	_____	_____	_____	_____
Effort / persistence	_____	_____	_____	_____	_____	_____	_____
Ability to hand in work on time	_____	_____	_____	_____	_____	_____	_____
Study habits	_____	_____	_____	_____	_____	_____	_____

PERSONAL EVALUATION

	Outstanding	Excellent	Good	Average	Below Average	Poor	N/A
Conduct	_____	_____	_____	_____	_____	_____	_____
Emotional stability	_____	_____	_____	_____	_____	_____	_____
Maturity	_____	_____	_____	_____	_____	_____	_____
Personal integrity	_____	_____	_____	_____	_____	_____	_____
Peer compatibility	_____	_____	_____	_____	_____	_____	_____
Relationship to adults	_____	_____	_____	_____	_____	_____	_____
Self-confidence	_____	_____	_____	_____	_____	_____	_____
Sense of humor	_____	_____	_____	_____	_____	_____	_____

Please comment on the following:

- 4. What course would you recommend this applicant take next year? _____

- 5. The applicant's ability to learn from his or her mistakes. _____

- 6. Are there particular strengths or weaknesses of which you feel the Admissions Committee should be aware? _____

- 7. Additional thoughts and comments are welcome. _____

- 8. If you have any reason to question the integrity of the applicant, please explain on a separate sheet of school letterhead.

I recommend this applicant for admission:
 enthusiastically strongly mildly with reservation not at all

Teacher's Signature Date

Teacher's Name (please print)

Mailing Address City/Town State Country Zip

We appreciate the time and effort required to complete this evaluation. Your thoughtful comments will help us gain a better understanding of the applicant as an individual and as a student.

Please send me additional information about The Piney Woods School.