

TEACHER REFERENCE

For students applying to Preschool/ Kindergarten

9	Academy	Way,	Kelowna,	ВС	V1V	3A4
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図)	admissions@aberdeenhall.com	ABERDEENHALL.COM

Student's Name:	C	urrent Grade:
Teacher's Name:	C	urrent School:
Relationship to Student (homeroom, subject, coach, etc.)		
As parent(s) of the above named student, I/we authorize our child's teacher to complete the following form. I/we understand that the teacher will complete the form and email it directly to the Admissions Office. I/we understand that this form will be kept in strictest confidence by the Aberdeen Hall Preparatory School Admissions Committee and Student Records.		
Parent Name(s):		
Parent Signature(s):		
Date(s)		
	dd/mm/yyyy	dd/mm/yyyy

To the Teacher:

The above student has made application to Aberdeen Hall Preparatory School. As part of the Admissions process, the following form must be completed. We would be grateful if this confidential form could be completed and emailed to the Admissions Office, admissions@aberdeenhall.com. Thank you very much for your time.

	Excellent	Good	Satisfactory	Needs Improvement
Literary Comprehension				
Numeric Comprehension				
Class Participation				
Attention Span in Class				
Timely Completion of Assignments				
Relationship with Peers				
Cooperation with Teachers				
Citizenship				
Extra-curricular Participation				
Artistic Ability				
Musical Ability				
Athletic Ability				
Parental Support				



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What words best describe the student?
Student Academic Strengths:
Student Academic Weaknesses:
Does the student participate in any support or enrichment programs?
Are there are any areas where the student really shines?
Are there any areas where the student may require additional help or encouragement?
Is the student an enthusiastic participant in school programs (clubs, athletics, arts etc.?)
Is the student frequently late or absent from school?
Have there been any disciplinary incidents that have occurred during the student's enrolment at your school?
Teacher Name: Teacher Signature:
Date: