



TEACHER RECOMMENDATION FORM

TO THE PARENT:

Please complete the top section of this form and send it **directly** to a teacher who knows the applicant well. It is understood that the information released will remain confidential.

Student's Name _____

Student Current Grade: _____ Name of School _____

Parent's Signature _____ Date _____

Teacher's Name : _____

TO THE TEACHER:

The above named student has applied for admission to The May School at The May Center for Learning. The May School's program provides intensive, individualized, skill-building instruction for intelligent students with learning differences. For more information on The May Center, please visit our website: www.maycenter.org.

We appreciate your assessment of the student. Your evaluation will be given full consideration and will be kept confidential.

Please complete the attached forms and mail to: The May Center, 1200 Old Pecos Trail, Santa Fe, NM 87505

Thank you for your time and effort in completing this form.

	Outstanding	Above Average	Average	Below Average	Poor
Academic Potential					
Academic Performance in Reading					
Academic Performance in Writing					
Academic Performance in Math					
Motivation					
Attention					
Organization					
Cooperation					
Initiative					
Respect for Authority					
Peer Relationships					
Maturity					
Gross Motor					
Fine Motor					
Speech and Language					

Please comment on the student's specific areas of strength:

Please comment on the student's specific areas of weakness:

Keeping in mind that The May Center offers a structured environment for students who have been diagnosed with learning differences or attention deficit disorder, how do you recommend this candidate? (circle one)

Enthusiastically

With reservations (please comment)

Do not recommend

Teacher's Name: _____

Title or Position: _____

How long have you known the applicant? In what capacity?

School Name: _____

Best way to contact you: _____

Teacher Signature: _____ Date: _____