



The Knox School

The Knox School
541 Long Beach Road
St. James, NY 11780
Phone: 631-686-1600
Fax: 631-686-1650

Application for Admission Principal/Head/Counselor Recommendation Form

Rec'd ___ / ___ / ___

To the Applicant:

Please type or print your name in the space below and give this form to your current Principal, Head, or Counselor. Attach a stamped envelope addressed to the Knox School at the address listed above.

Name of Student _____ Applicant to grade _____

Signature _____ Date _____

To the Parent/Guardian:

Please read and sign the statement below.

I acknowledge that I waive my right to read the confidential recommendation and the school report for the student listed above.

Name of Parent or Guardian _____

Signature _____ Date _____

To the Principal/Head/Counselor:

This recommendation will remain confidential and will not become part of the student's permanent record. Be sure the parent/guardian has signed the form in the space above. Feel free to use additional sheets, if necessary. Thank you for your cooperation and candor.

Your Name _____ Title _____

School _____

Please submit these materials with this recommendation:

- Final or mid-semester grades for fall term (must be included)
- Grades since 6th grade, if available
- Standardized test scores
- Recent teacher reports, if any
- A school profile, if available

Please provide the following information about your school.

In what month does your school year end? _____ Does your school use a block scheduling system? Yes No

How many students are in this student's entire grade? ____ Are students placed in sections according to ability? Yes No

If yes, please tell us in which level the applicant is placed for each subject.

Please explain your school's grading system.

What is the passing mark? _____ Honors marks? _____

What percent of your students receive which grades? _____

Does your school rank? Yes No Is your rank: Approximate Exact

This candidate ranks _____ out of _____. _____ other students share this rank.

If the student is not, or has not, been in good academic standing, please explain.

Has the student ever been dismissed, suspended, placed on probation, or received other serious disciplinary sanction? Has he or she withdrawn from school voluntarily for an extended period of time for other than reasons of health? If the answer to either or both of these questions is in the affirmative, please provide a full explanation on a separate piece of paper.

How well do you know the student academically? _____ As a person? _____

What are the first three words that come to mind to describe this student?

1. _____ 2. _____ 3. _____

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught. If you have no fair basis for judgment, do not hesitate to say so.

	One of the top few I have ever encountered	Excellent (top 10% this year)	Good (above average)	Average	Below average	No basis for judgment
Academic Potential						
Academic Achievement						
Intellectual Curiosity						
Effort/Determination						
Ability to Work Independently						
Organization						
Creativity						
Willingness to Take Intellectual Risks						
Concern for Others						
Honesty/Integrity						
Self-esteem						
Maturity (relative to age)						
Responsibility						
Respect Accorded by Faculty						
Respect Accorded by Peers						
Emotional Stability						
Overall Evaluation as a Person						
Overall Evaluation as a Student						

If the student is relatively weak or strong in any areas listed above, please elaborate.

In what way has the student made significant contributions to your community?

Please add any additional information that will give us a more complete picture of the student.

Thank you for taking the time to complete this evaluation. Your reflections are an important part of the student's application.

Signature _____ Date _____

Mailing address _____ Email Address _____

_____ Telephone _____