



SAINT ROSE ACADEMY

Admission Recommendation Form
To be completed by the applicant's PRINCIPAL

Applicant: Please complete the top section of this page. Have the principal of your current school complete the section below.

Applicant's name: _____

Current school: _____

Address: _____

City: _____ State: _____ Zip code: _____

Telephone: _____ Email: _____

Parent's signature Date

Parent's signature Date

Principal: The student named above is applying for admission to Saint Rose Academy. Thank you for taking the time to honestly complete this recommendation. Your comments will be held in confidence.

	Excellent	Good	Fair	Poor	Not Known
Attendance	_____	_____	_____	_____	_____
Punctuality	_____	_____	_____	_____	_____
Commitment to the practice of Christian virtue	_____	_____	_____	_____	_____
Treats peers with respect, charity, and dignity	_____	_____	_____	_____	_____
Treats adults with respect, charity, and dignity	_____	_____	_____	_____	_____
Acts in a manner that is honest, trustworthy, responsible, and just	_____	_____	_____	_____	_____
Is courteous	_____	_____	_____	_____	_____
Works to best of his/her ability	_____	_____	_____	_____	_____
Attends properly and fully to assigned tasks	_____	_____	_____	_____	_____
Study habits	_____	_____	_____	_____	_____

Please summarize below the applicant's scholastic achievement, character, and family and explain why you may or may not recommend him/her for admission at Saint Rose Academy.

Signature: _____

Date: _____

Printed Name: _____

Work Phone: _____