



Memorial Math Teacher Evaluation Form

Student: Please give this form to your current Math teacher.

Teacher: The student named below has applied for admission to San Joaquin Memorial High School and requests that you complete this recommendation form on his/her behalf. The student's parents have signed a waiver and your remarks will remain confidential. The Admissions Committee greatly appreciates your cooperation and candor. Thank you.

Student's Name _____

Current School _____

Please rate this student in the following categories.

(1 = Below Average, 5 = Outstanding)

Academic Ability	1	2	3	4	5
Academic Performance	1	2	3	4	5
Effort	1	2	3	4	5
Responsibility Towards Assignments	1	2	3	4	5
Ability to Work With Others	1	2	3	4	5
Participation in School Community	1	2	3	4	5
Interpersonal Relationships	1	2	3	4	5
Parental Participation	1	2	3	4	5

Recommendation (Please Check One)

- Strongly Recommend
- Recommend
- Recommend With Reservations
- Do Not Recommend

Please answer the following questions.

1. How long have you known the student academically?

2. How long have you known the student personally?

3. What are three words you would use to describe the student?

a. _____ b. _____ c. _____

4. The courses below suggest a typical sequence of Math classes in many U.S. high schools. Please check off the courses or list others which the student will have completed by the end of the current school year.

- Basic First Year Algebra** (does not include extensive study of rational expressions, irrational numbers, and quadratic equations)
- First Year Algebra** (a thorough course which included quadratics)
- Geometry**
- Second Year Algebra** (not including trigonometry)
- Second Year Algebra** (includes numerical trigonometry through the laws of sine and cosine)
- Pre-Calculus** (including analytical trigonometry)
- Calculus**
- Other** _____

5. Describe the contents of your course. Please include the major concepts that are covered (i.e. solving linear equations and inequalities both algebraically and by graphing, simplifying and solving exponential equations, etc.), as this will assist us in placing the student in the correct Math course.

6. Please elaborate on the applicant's strengths and weaknesses in the classroom.

Thank you for your assistance in the application process!

Teacher Name	Date
Signature	Email
Mailing address	
Telephone	

Please mail or fax completed form to:

**San Joaquin Memorial High School
Attn: Admissions Department
1406 N. Fresno St.
Fresno, CA 93703
U.S.A.**

Fax: +001 (559) 268-1351

San Joaquin Memorial High School admits students of any race, color, religion, national and ethnic origin and accords them all the rights, privileges and activities generally made available to students at the school. The school does not discriminate on the basis of race, color, religion, national and ethnic origin in the administration of its policies or programs.

