



# STUDENT RECOMMENDATION FORM

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## TO BE COMPLETED FOR ONLY FIRST THROUGH TWELTH GRADE STUDENTS

Pastor or Educator: Please fold, secure, stamp, and mail to the address above, or fax to the above-referenced number. If you desire to comment further in person, please call us at the above referenced number. *Evaluation is not considered valid if completed by anyone other than a pastor or educator.*

This confidential recommendation is submitted to you by the parent/guardian of \_\_\_\_\_.  
This student has applied for admission to our school. Thank you in advance for taking the time to complete and return this form to us at your earliest convenience.

How well do you know this student?

☐ Well ☐ Some ☐ Little ☐ How many years? \_\_\_\_\_

Please check the adjectives that most nearly describe the applicant's standing on the items listed below:

### CHOICE OF FRIENDS

- ☐ Chooses wisely
- ☐ Somewhat wisely
- ☐ Somewhat carelessly
- ☐ Chooses carelessly

### INDUSTRIOUSNESS

- ☐ Resourceful and enthusiastic
- ☐ Average worker
- ☐ Works only under pressure
- ☐ Not interested in work

### STRENGTH OF CHARACTER

- ☐ Firm, steady, consistent
- ☐ Fairly stable
- ☐ Weak, easily influenced

### COOPERATION

- ☐ Helpful
- ☐ Works well with others
- ☐ Critical

### TRUSTWORTHINESS

- ☐ Very trustworthy
- ☐ Generally trustworthy
- ☐ Has occasional challenges with honesty

### PERSONAL APPEARANCE

- ☐ Well groomed
- ☐ Neat, clean
- ☐ Careless

### RESPONSE TO AUTHORITY

- ☐ Respectful and obedient
- ☐ Satisfactory
- ☐ Has occasional challenges with authority

### ATTENDANCE/PUNCTUALITY

- ☐ Rarely late or absent
- ☐ Somewhat late or absent
- ☐ Frequently late or absent

### INTELLECTUAL APTITUDE

- ☐ Very quick to learn
- ☐ Learns easily
- ☐ Must study hard to learn
- ☐ Educational disabilities

### FAMILY'S FINANCIAL RESPONSIBILITY

(Private schools only - please consult bookkeeper)

- ☐ Meets obligations promptly
- ☐ Usually meets obligations
- ☐ Difficulty meeting obligations

Do you recommend applicant as a desirable student for a private Christian school? ☐ Yes ☐ No

Your Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Please make any remarks you feel necessary on the reverse side of this form.

Any additional information or comments may be given here: