N. E. MILES JEWISH DAY SCHOOL CONFIDENTIAL TEACHER RECOMMENDATION FORM – KINDERGARTEN

To Parent(s) of Applicant:	
• • • • • • • • • • • • • • • • • • • •	opriate teacher in your child's current school. <u>The recommender</u> ce at the school. In order to ensure a candid assessment of the elease statement included below.
the following information pertaining to our child. I/We	to release to the N. E. Miles Jewish Day School understand that this evaluation is confidential, and I/we hereby also understand that the N. E. Miles Jewish Day School may elect
Parent's Signature	Date
Го Recommender:	

Recommendation Form for Admission to the N. E. Miles Jewish Day School's Kindergarten Class

This child is applying for admission to the N. E. Miles Jewish Day School. We would appreciate your observations about the areas listed below. Your candid estimate of the applicant will be of invaluable assistance to our Admissions Committee and will remain confidential.

Please check your assessment of the applicant in each category.

Social / Emotional Development For Applicant's Grade Level

Social / Emotional Development For Applicant's Grade Level						
	Outstanding	Above Average	Average	Below Average	Comments or Concerns	
Interactions with adults						
Interactions with peers						
Play Behavior						
Appropriate response during group instruction						
Acceptance of responsibility for actions						
Self-confidence						
Self control						
Leadership qualities						
Respectful of rights and property of others						
Verbal and appropriate expression of needs and requests						

Work Habits

	Outstanding	Above Average	Average	Below Average	Comments or Concerns
Is attentive; listens carefully					
Follows directions					
Works independently; shows					
initiative and self motivation					
Completes task on time					
Uses time and materials					
effectively					

Language Development / Communication Skills

	Outstanding	Above	Averege	Below	Comments or Concerns
	Outstanding	Average	Average	Average	Comments of Concerns
Speaks in complete sentences					
Orally labels common everyday items/uses appropriate vocabulary					
Makes relevant verbal contributions during small group discussions					
Sequences events					

Physical Development

	Outstanding	Above Average	Average	Below Average	Comments or Concerns
Gross motor (balance, movement through space, etc.)					
Fine Motor (hand-eye coordination, stacks blocks, cuts, copies some letters & shapes)					

Please circle those terms that are TYPICAL and comment if needed:

Social Development - plays with others, plays alone, takes the lead, initiates activity, reticent in new situations, stands up for self, follows, exhibits independence, follows rules, shares, responds positively to correction

Emotional Development - angry, controlled, content, withdrawn, confident, aggressive, nervous, shy, receptive, hostile, even-tempered, adaptable, flexible, happy

Work Habits- works independently, works in a group, follows directions, focuses, difficulty in maintaining focus, listens attentively, organizes, is persistent, is distractible, completes tasks



Comments: **Pre-Academic and Cognitive Development** Not Most of Some of Seldom Formally Comments or Concerns the Time the Time Introduced Classifies objects by different attributes Recognizes patterns Compares size relationships (large/small; long/short, etc.) Recognizes and orders cardinal numerals in sequence (1,2,3 etc.) Establishes a one to one correspondence (by matching members of equivalent sets) Spatial awareness; awareness of directionality and orientation Distinguishes words that begin with the same sound (ball - bat, etc.) Shows an interest in printed words In the following section, please mark a check next to the appropriate responses: 1. Has the candidate been given an educational evaluation by a diagnostician or psychologist? YES____ NO____ If yes, when? _____ For what purpose? 2. Does the candidate have any significant limitations (language/speech, physical, emotional, social)? YES NO If yes, please explain: 3. Has the child been exposed to any language(s) other than his/her native language?

If yes, please indicate which language(s) and describe in what situation it is or was used:

4. How do you consider the child's parents? Very cooperative Usually cooperative Rarely

cooperative_____ Follows through with suggestions_____ Has realistic picture of their child's ability_____



YES NO

Values child's uniqueness_____

F -	Please comment on degree and type of par	rental involvemer	t:					
ŀ	Compared to other students in similar circu have encountered in my career O Weak Other comments	outstanding	Good (above av	verage)	•			
Plea	ease comment:							
Area	eas in which the student excels:							
Area	eas in which the child has the greatest needs	:						
Plea:	ease write any additional comments about th		·					
	Thank you for your time and effort in evaluati Miles Jewish Day School.	ng this student a Your informatio	nd assisting both th n will remain confic	ne candidato	e and the N. E.			
Teac	acher's Signature		Da	te				
Print	nted Name Phone # (including area code)							
Scho	hool Name							
Scho	hool Address	City		State	_ Zip			
In wh	what capacit y have you known the applicant?	?						
Leng	ngth of acquaintance							
	^ ft ox l-	ating the form in	ease mail to:					

After completing the form, please mail to:

N. E. Miles Jewish Day School

4000 Montclair Road

Birmingham, AL 35213

For further questions please call 205-879-1068