



## Math Teacher Reference Form

*For applicants to grades 7-9*

### Dear Parent:

As a part of your student's application to The New Academy, please complete the top portion of this form and submit it to your student's current English teacher at his/her school.

Student Name \_\_\_\_\_ Current Grade \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Name (printed)

Please read and sign the following statement:

I acknowledge that this reference form will be kept confidential between my child's current Math teacher and The New Academy Admissions Committee. I understand that I will not be made aware of the information provided here.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

### Dear Math Teacher:

The above-named student has applied to The New Academy. We would like to consider your evaluation of this student as a part of our admissions process. Please complete this form and return it The New Academy. If you have any questions or would like to speak to someone about this reference, please call our Admissions Office.

**Please note that this student's application will not be considered complete without this form.**

Teacher Name \_\_\_\_\_ Specific Title \_\_\_\_\_

School Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_  
Teacher Signature

\_\_\_\_\_  
Date

Please mail this form to:

**The New Academy**

**Attention: Admissions Office**

**3554 West Orange Country Club Drive**

**Winter Garden, FL 34787**

How long have you known this student? \_\_\_\_\_

Please circle the most appropriate response:

	Below Average	Above Average	Average	Outstanding
Scholastic potential	1	2	3	4
Scholastic achievement	1	2	3	4
Effort applied to work	1	2	3	4
Classroom conduct	1	2	3	4
Respectfulness to faculty	1	2	3	4
Respectfulness to peers	1	2	3	4
Care and concern for others	1	2	3	4
Teachable spirit	1	2	3	4
Even temperament	1	2	3	4
Overall recommendation	1	2	3	4

1. How does this student relate with his/her peers and teachers in your school? \_\_\_\_\_  
\_\_\_\_\_

2. Have the parents been supportive of your role as teacher? \_\_\_\_\_  
\_\_\_\_\_

3. How would you describe the frequency with which you have behavioral issues with this student (never, rarely, on occasion, frequently)? Please explain. \_\_\_\_\_  
\_\_\_\_\_

4. Does this student receive or need any special accommodations in the classroom? \_\_\_\_\_  
\_\_\_\_\_

5. Please provide any other information which you feel will be useful in our assessment of this student. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please indicate your level of recommendation regarding this student's admission to our school:

Enthusiastically     Strongly     Fairly strongly     With reservation     Do not recommend