



## RECOMMENDATION FORM PreK to 1

*Thank you for the time you are taking to complete this form. This is a confidential form and will only be viewed by the school personnel in placing the student in our program. It will not be shared directly or indirectly with parents or guardians. Please return to the Director of Admissions [admissions@ihmschoolmd.org](mailto:admissions@ihmschoolmd.org).*

Student's name: \_\_\_\_\_ Current School: \_\_\_\_\_

Current grade level: \_\_\_\_\_ Applying for grade: \_\_\_\_\_

Student's primary language: \_\_\_\_\_ English Other: \_\_\_\_\_

Student's attendance: \_\_\_\_\_ regular \_\_\_\_\_ not regular \_\_\_\_\_ frequently tardy

## SOCIAL AND EMOTIONAL DEVELOPMENT

	Advanced	Age Appropriate	Emerging	Not evident
Comfort with peers				
Comfort with adults				
Ability to work independently				
Cooperation in classroom				
Sharing				
Proper use of materials				
Acceptance of limits				
Respect for classroom rules				
Curiosity				
Attention span				
Self-help skills: clothes, bathroom, lunch/snack				

## ACADEMIC READINESS

	Advanced	Age Appropriate	Emerging	Not evident
Fine motor coordination				
Recognizes numerals				
Recognizes letters - upper case				
Recognizes letters - lower case				
Listens to directions				
Completes tasks				
Sound-symbol correspondence				
Ability to transition between tasks				
Self-starter				
Speech is clear				
Vocabulary				

## APPLICANT AND FAMILY INFORMATION

Please list 5 to 8 words that best describe this student:

Student's strengths: \_\_\_\_\_

Student's areas for growth: \_\_\_\_\_

Are parents/guardians supportive of the school and the teachers:    \_\_\_\_ yes \_\_\_\_ no

Comments, if any: \_\_\_\_\_

Is the family current on any financial obligations to the school:    \_\_\_\_yes    \_\_\_\_no

Is there anything that you prefer to discuss by telephone?    \_\_\_\_yes    \_\_\_\_no

Evaluator's name: \_\_\_\_\_ Phone: \_\_\_\_\_

School: \_\_\_\_\_ Position: \_\_\_\_\_

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

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