## **Student Recommendation Form**

Saint Joseph Academy 101 St. Joseph Drive Brownsville, TX 78520 542-3581 fax(956)542-4748

The following student has expressed a desire to attend a Saint Joseph Academy. Please help us evaluate this student's potential for success by completing this form. This form should be returned along with a copy of the student's transcript reflecting at grades from the current year as well as the previous year and standardized test scores. This form will be for admissions purposes only and will not become part of the applicant's permanent file. The completed form will not be made available to anyone (including the student and/or his/her parents) outside the admissions committee.

Student			Grade:				
1. Ha	s this student ever be	een a disciplinar	ry problem?	If so, plea	ase explai	in.	
2. Re	commendation:	_ Language Ar	rts	Math			
		Not Recommended	Without Enthusiasm	Fairly Strongly	Strongly	With Enthusiasm	
	Self Discipline						
	Study Skills/Conduct						
	Academic Maturity						
4. Plea	ase indicate how long	g you have knov	wn this stud	ent:		_	
aca nee	luation: Please wr demic or personal c ds. You may use tl uld be reviewed and	haracteristics – he back of this	so that we sheet or att	may bet	ter accon	nmodate his/he	
Teacher Signature			Pri	Principal Signature			