

SSAT STANDARD APPLICATION ONLINE

For Independent Boarding and Day Schools

Principal/Head/Counselor Recommendation Form

To the Applicant:

- This form is a paper version of the Standard Application Online principal recommendation form.
- This form must be completed by the principal/counselor at the applicant's current school.
- The completed form must be directly sent to the school(s) to which the applicant is applying OR if the applicant is working with a placement advisor, this form should be submitted to the placement office at the applicant's current school.
- Please do not send this form to SSATB - Standard Application Online for processing.

Name of applicant

Grade Applying to

Signature of applicant

Date

To the Parent/Guardian:

Please read and sign the statement below.

I acknowledge that I waive my right to read the confidential principal recommendation and the school report for the student listed above.

Name of parent or guardian (please print)

Signature of parent or guardian

Date

To the School Official:

- This form is part of a standard application being used by many independent schools in the USA, Canada, and abroad. The submitted forms and records will remain confidential. The parent/guardian has signed the waiver in the space above.
- When completed, mail the form directly to the school(s) to which the applicant is applying OR if the applicant is working with a placement advisor, this form should be submitted to the placement office at the applicant's current school.
- Be sure to submit all pages of this form. **There is an extra page at the end of this document for additional comments.**

Thank you for taking your valuable time to complete this form. Your reflections are an important part of the student's application.

Name of school official (please print)

Title

Date



Applicant Name: _____

How well do you know the student academically? _____

As a person? _____

What are the first three words that come to mind to describe this student?

1. _____ 2. _____ 3. _____

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught. If you have no fair basis for judgment, do not hesitate to say so.

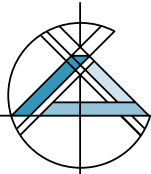
	One of the top few I have ever encountered	Excellent (top 10% this year)	Good (above average)	Average	Below average	No basis for judgment
Academic Potential						
Academic Achievement						
Intellectual Curiosity						
Effort/Determination						
Ability to Work Independently						
Organization						
Creativity						
Willingness to Take Intellectual Risks						
Concern for Others						
Honesty/Integrity						
Self-esteem						
Maturity (relative to age)						
Responsibility						
Respect Accorded by Faculty						
Respect Accorded by Peers						
Emotional Stability						
Overall Evaluation as a Person						
Overall Evaluation as a Student						

If the student is relatively weak or strong in any areas listed above, please elaborate.

Please comment on this student's character, citizenship, and contributions to your community.

Please provide any additional information that will give us a more complete picture of the student.

Name	Signature	Date
Mailing address		
E-mail address	Phone number	



SSAT STANDARD APPLICATION ONLINE

For Independent Boarding and Day Schools

English Teacher Recommendation Form

To the Applicant:

- This form is a paper version of the Standard Application Online English recommendation form.
- This form must be completed by an English teacher at the applicant's current school.
- The completed form must be directly sent to the school(s) to which the applicant is applying OR if the applicant is working with a placement advisor, this form should be submitted to the placement office at the applicant's current school.
- Please do not send this form to SSATB - Standard Application Online for processing.

Name of applicant

Grade Applying to

Signature of applicant

Date

To the Parent/Guardian:

Please read and sign the statement below.

I acknowledge that I waive my right to read the confidential principal recommendation and the school report for the student listed above.

Name of parent or guardian (please print)

Signature of parent or guardian

Date

To the School Official:

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- Be sure to submit all pages of this form. **There is an extra page at the end of this document for additional comments.**

Thank you for taking your valuable time to complete this form. Your reflections are an important part of the student's application.

Name of school official (please print)

Title

Date



Applicant Name: _____

How well do you know the student academically? _____

As a person? _____

In what years did you teach the student? _____

How large is/was the class? _____

What course(s)? _____

Is the student on a block schedule? _____

Is this course part of a tracking system or designated as an honors or accelerated course? ☐ Yes ☐ No

What are the first three words that come to mind to describe this student?

1. _____ 2. _____ 3. _____

Briefly describe your course. It is especially helpful to know what texts are used and if the students are grouped by ability.

How accurately does the student understand what he or she has read?

How well does the student write in comparison with other students whom you have taught? Please be specific about areas of strength and weakness.

How well does the student accept advice or criticism?



Applicant Name: _____

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught. If you have no fair basis for judgment, do not hesitate to say so.

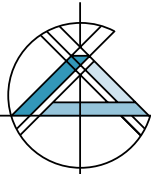
	One of the top few I have ever encountered	Excellent (top 10% this year)	Good (above average)	Average	Below average	No basis for judgment
Academic Potential						
Academic Achievement						
Intellectual Curiosity						
Effort/Determination						
Ability to Work Independently						
Organization						
Creativity						
Willingness to Take Intellectual Risks						
Concern for Others						
Honesty/Integrity						
Self-esteem						
Maturity (relative to age)						
Responsibility						
Respect Accorded by Faculty						
Respect Accorded by Peers						
Emotional Stability						
Overall Evaluation as a Person						
Overall Evaluation as a Student						

If the student is relatively weak or strong in any areas listed above, please elaborate.

Please comment on this student's character, citizenship, and contributions to your community.

Please provide any additional information that will give us a more complete picture of the student.

Name	Signature	Date
Mailing address		
E-mail address	Phone number	



To the Applicant:

- This form is a paper version of the Standard Application Online mathematics recommendation form.
- This form must be completed by a mathematics teacher at the applicant's current school.
- The completed form must be directly sent to the school(s) to which the applicant is applying OR if the applicant is working with a placement advisor, this form should be submitted to the placement office at the applicant's current school.
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Name of applicant

Grade Applying to

Signature of applicant

Date

To the Parent/Guardian:

Please read and sign the statement below.

I acknowledge that I waive my right to read the confidential principal recommendation and the school report for the student listed above.

Name of parent or guardian (please print)

Signature of parent or guardian

Date

To the School Official:

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- Be sure to submit all pages of this form. **There is an extra page at the end of this document for additional comments.**

Thank you for taking your valuable time to complete this form. Your reflections are an important part of the student's application.

Name of school official (please print)

Title

Date



Applicant Name: _____

How well do you know the student academically? _____

As a person? _____

In what years did you teach the student? _____ How large is/was the class? _____

What course(s)? _____ Is the student on a block schedule? _____

What are the first three words that come to mind to describe this student?

1. _____ 2. _____ 3. _____

Briefly describe your course. It is especially helpful to know what texts are used and if the students are grouped by ability.

Is this course part of a tracking system or designated as an honors or accelerated course? ☐ Yes ☐ No

What math course would be the most appropriate placement for the student for the next academic year? _____

The courses listed below suggest a sequence typical of the mathematics curriculum in many U.S. secondary schools. Please check those courses or list others which the student will have completed by the end of the current year.

Basic First Year Algebra (does not include extensive study of expressions, rational numbers, and quadratic equations)

First Year Algebra (a thorough course including quadratics)

Geometry

Second Year Algebra (not including trigonometry)

Second Year Algebra (includes numerical trigonometry through the laws of sine and cosine)

Pre-Calculus (including analytical trigonometry)

Calculus (an introduction)

Calculus (Advanced Placement AB)

Calculus (Advanced Placement BC)

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught. If you have no fair basis for judgment, do not hesitate to say so.

	One of the top few I have ever encountered	Excellent (top 10% this year)	Good (above average)	Average	Below average	No basis for judgment
Knowledge of the Basic Skills						
Accuracy in the Use of Basic Skills						
Problem Solving Ability						
Reasoning Ability						
Understanding of and Appreciation for the Underlying Ideas and Concepts						
Effort						
Overall Performance						
Willingness to Accept the Challenge of the the More Difficult Problems and Exercises						
Command of Mathematics When Compared to Other Students Whom You Have Taught						



Applicant Name: _____

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught. If you have no fair basis for judgment, do not hesitate to say so.

	One of the top few I have ever encountered	Excellent (top 10% this year)	Good (above average)	Average	Below average	No basis for judgment
Academic Potential						
Academic Achievement						
Intellectual Curiosity						
Effort/Determination						
Ability to Work Independently						
Organization						
Creativity						
Willingness to Take Intellectual Risks						
Concern for Others						
Honesty/Integrity						
Self-esteem						
Maturity (relative to age)						
Responsibility						
Respect Accorded by Faculty						
Respect Accorded by Peers						
Emotional Stability						
Overall Evaluation as a Person						
Overall Evaluation as a Student						

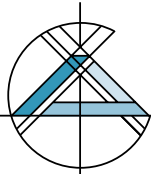
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Please provide any additional information that will give us a more complete picture of the student.

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Name	Signature	Date
Mailing address		
E-mail address	Phone number	



SSAT STANDARD APPLICATION ONLINE

For Independent Boarding and Day Schools

School Record and Transcript Form

To the Applicant:

- This form is a paper version of the Standard Application Online school record and transcript form.
- This form must be completed by the principal/counselor at the applicant's current school.
- The completed form must be directly sent to the school(s) to which the applicant is applying OR if the applicant is working with a placement advisor, this form should be submitted to the placement office at the applicant's current school.
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Name of applicant

Grade Applying to

Signature of applicant

Date

To the Parent/Guardian:

Please read and sign the statement below.

I acknowledge that I waive my right to read the confidential principal recommendation and the school report for the student listed above.

Name of parent or guardian (please print)

Signature of parent or guardian

Date

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Thank you for taking your valuable time to complete this form. Your reflections are an important part of the student's application.

Name of school official (please print)

Title

Date



Applicant Name: _____

- Please be sure to attach a copy of transcripts/grade reports along with this form
- The student transcript must include any current year to date grades as well as the most recent full year. Many schools require at least the last two complete years of grades in addition to the year in progress.
- If you want to submit any additional transcripts/reports after submitting this form, please send those to the school(s) directly.
- Please attach the students's attendance record if not already included in the report card, indicating the number of days he or she has been absent or tardy each year while at your school.

Please mark the reports that you are attaching to this form:

☐ School Transcripts ☐ Applicable grade reports ☐ Standardized test scores ☐ School Profile

School Profile:

School serves grades: _____ to _____. Number of students in entire school: _____

In what month does your school year begin? _____ End? _____

Does your school use a block scheduling system? ☐ Yes ☐ No

Please explain your school's grading system. Select one:

☐ 4.0 Scale ☐ 4.3 Scale ☐ 1 - 5 ☐ 100 - 0 ☐ A - F ☐ Four Passing Grades ☐ Three Passing Grades

What is the passing mark? _____ Honors mark? _____

What percent of your students receive which grades? _____

Does your school rank? ☐ Yes ☐ No

Is your rank: ☐ Approximate ☐ Exact How many students are in the entire grade? _____

Student Record:

This candidate ranks _____ out of _____. _____ other students share this rank.

Are students placed in sections according to ability? ☐ Yes ☐ No

If yes, please tell us in which level the applicant is placed for each subject.

If the student's attendance record is not listed on the transcript, please indicate the number of days he or she has been absent or tardy each year while at your school. _____

If the student is not, or has not been, in good standing, please explain. _____

Has the student ever been dismissed, suspended, placed on probation, or received other serious disciplinary sanction?

☐ Yes ☐ No

Has he or she withdrawn from school voluntarily for an extended period of time for reasons other than health?

☐ Yes ☐ No

If the answer to either or both of these questions is yes, please provide a full explanation. **There is an extra page at the end of this document for additional comments.**

Name	Signature	Date
Mailing address		
E-mail address	Phone number	