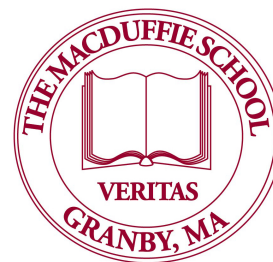


The MacDuffie School

66 School Street • Granby, MA • 01033 • Tel. (413) 467-1601 • Fax (413) 460-0199



PERSONAL RECOMMENDATION

Please complete this portion of the form and give this form to a coach, minister, community leader, teacher, or other person who is qualified to evaluate the student for the purpose of application for admission. Please provide your reference with a stamped envelope addressed to the Admissions Office.

Name of Student: _____ Current Grade: _____

I waive all my right to read the confidential recommendation for the student listed above.

(Student's signature)

(date)

(Parent/Guardian signature)

(date)

(Parent/Guardian signature)

(date)

Applicants to The MacDuffie School are asked to supply confidential, personal recommendations from their current teachers. These recommendations will assist the Admissions Committee in assessing social adjustment, intellectual potential, and quality of character. Your candid responses when evaluating this student are greatly appreciated, will be held in confidence and used for admission purposes only, and will not become part of the candidate's permanent record.

Before returning this form, please photocopy for your files.

How long have you known the student? _____

Relationship to student? _____

Areas of interaction/evaluation? _____

Personal Evaluation In relation to other students you have known, please evaluate this student in the following areas to the best of your ability.

	Excellent	Above Average	Average	Below Average	Weak
Ability to Work Independently	5	4	3	2	1
Analytical Ability	5	4	3	2	1
Attention Span	5	4	3	2	1
Consideration of Others	5	4	3	2	1
Cooperation of Parents	5	4	3	2	1
Creativity	5	4	3	2	1
Effort & Perseverance	5	4	3	2	1
Emotional Stability	5	4	3	2	1
Follows Directions	5	4	3	2	1
Initiative	5	4	3	2	1

Integrity & Honesty	5	4	3	2	1
Intellectual Curiosity	5	4	3	2	1
Leadership	5	4	3	2	1
Maturity (relative to age)	5	4	3	2	1
Motivation/Attitude	5	4	3	2	1
Organization	5	4	3	2	1
Self-discipline	5	4	3	2	1
Self-esteem	5	4	3	2	1
Use of Time	5	4	3	2	1
Work Habits	5	4	3	2	1

Is the applicant capable of handling challenging academic demands? _____

Does the applicant interact well with: _____ peers? _____ teachers? _____ adults/persons of authority?

If no, please elaborate: _____

Please comment on the applicant's ability to respond to criticism or suggestion: _____

Has the applicant been a discipline problem in the community? ____ Yes ____ No If yes, please elaborate: _____

What is your impression of the student's character, aims, values, relative maturity, and general enthusiasm?

What additional information can you share about this applicant? _____

(Please Print)

Name: _____ Home Phone: _____
(area code)

Address: _____ Work Phone: _____
(street or PO box) (area code)

(city) (state) (zip) Email: _____

May we contact you with for further information? _____ Yes _____ No

(signature)

(date)

Please return form to: Admissions Office, The MacDuffie School, 66 School Street, Granby, MA 01033
Phone: (413) 467-1601 Fax: (413) 460-0199
email: admissions@macduffie.org