



Granby Preparatory Academy

Application for Admission

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 rights to read the confidential recommendation for the student listed above.

(Student's signature)

(date)

(Parent/Guardian signature)

(date)

(Parent/Guardian signature)

(date)

Applicants to Granby Preparatory Academy are asked to supply confidential, personal recommendations from people outside their family who know them well. 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 and will be held in confidence and used for admission purposes only and will not become part of the candidate's permanent school record. *Before returning this to Granby Preparatory Academy, 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 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: _____

In what ways is the applicant active in his/her community? _____

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

What more would you like us to know about this applicant? _____

(Please print)

Name: _____

Home Phone: _____

(area code)

Address: _____

Work Phone: _____

(area code)

(street or PO box)

E-mail: _____

(city)

(state)

(zip)

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

(signature)

(date)

Please return form to: Admissions Office, Granby Preparatory Academy, 66 School Street, Granby MA 01033
phone: (800) 766-4656 fax: (413) 519-4757 email: admissions@granbyprep.com