

Southside Christian School Teacher Recommendation Form (2020-21) For Students Grades 6-12

<u>Teacher</u>: Your recommendation is highly valued by us as we consider this student for admission to Southside Christian School. We at SCS ask that you complete this form carefully and return it directly to our Upper School Admissions Office at ecain@scswarriors.com or mail it to Southside Christian School to the attention of the Upper School Admissions at 299 Carlton Street, Clayton, NC 27520.

Student's Name:								
	(Last)	(First)	(Middle)	(Current Grade Level)				
			scribing this student?					
3. What observation	s concerning strengtl	hs, weaknesses, healt	h or special needs are there i	in regards to this student?				

How do you rate this student in the following areas:

Personal Qualities	Excellent	Above Average	Average	Below Average	No Opportunity to Observe
Leadership					
Punctuality					
Responsibility					
Initiative (self-starter)					
Reaction to criticism					
Reaction to setbacks					
Respect accorded by peers					
Respect accorded by adults					
Emotional stability					
Cooperativeness					
(team worker)					
Attitude toward authority					
Integrity and honesty					
Reaction to stress					

4. Please share with us any intercover recent experiences or inc					information could
5. How do you support this st					
Enthusiastically	_Strongly	Fairly Strongly _	Without Enthusias	smNot Recommend	led
				lates.	
Other:					
Teacher's Name:		Scho	ool's Phone Number: _		
School's Name:					
School's Address:(Street)		(0	City)	(State)	(Zip)
Teacher's Signature:					