



Grades 6-12

To be completed by School Administrator, Guidance Counselor, or Current Math or English Teacher

Applicant: Please fill out Part A of this form, and then give it to any of the above persons for the completion of Part B. It is to be mailed directly to the Office of Admissions by the person completing Part B. Please provide a stamped, addressed envelope for that purpose. Mail to the University School of Jackson Admissions Office, 240 McClellan Road, Jackson, TN 38305.

Part A:

Name of Applicant: _____

Last

First

Middle

Applying for Grade: _____ School Year: _____

Applicant's Address: _____

Part B:

The student named above is applying for admission to the University School of Jackson. We would appreciate your full and candid appraisal of his or her academic and personal qualities. Use a separate sheet if necessary. Please feel free to contact us, if you wish, at (731) 660-1692.

1. In what capacity have you known and worked with the applicant? _____

1970 For how long? _____

2. Please describe any unusual talent or competence (arts, music, athletics, leadership, etc.) in the applicant of which you are aware.

3. What are the applicant's greatest strengths?

4. What are the applicant's greatest needs or weaknesses?

5. Please rate those characteristics of the applicant with which you are familiar:

Academic Performance:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
Academic Potential:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
Leadership:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
Extra-Curricular Participation:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
Artistic Participation:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
Athletic Participation:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
Emotional Maturity:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
Respect for Rules:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
Respect for Others:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
Respect for Property:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
Desire to Improve:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
Self-Confidence:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
Punctuality:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>
School Attendance:	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	NA <input type="checkbox"/>

6. Please comment on any characteristics marked poor.

7. To your knowledge, has this student been suspended or expelled from school? If so, please explain.

8. Has this applicant ever been offered and/or provided with learning assistance to regular classroom instruction (gifted/remedial program, tutoring, academic/psychological testing)? If so, please explain:

9. Please provide any additional comments you believe would assist us in considering whether we should consider this applicant for admission to the University School of Jackson:

Thank you for your assistance in helping us evaluate this student.

Your name: _____

Address: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Telephone: _____

Signature: _____ Date: _____