

## Maur Hill – Mount Academy

Admission Office 1000 Green Street Atchison, KS 66002 Telephone: 913-367-5482 admissions@mh-ma.com

## <u>School Administrator Recommendation Form</u> Principal, Academic Counselor, or Assistant Principal

Student Information

Name: \_\_\_\_\_

Parent(s):

Applying for grade:\_\_\_\_\_

Phone:\_\_\_\_\_

## Please submit this form to the appropriate person at your school.

## **School Administrator**

The above named student has applied to Maur Hill - Mount Academy. Please indicate your opinions of this applicant in respect to any of the following areas in which you feel qualified to judge from your observation, records, and personal experience. Your communications will remain confidential. Please contact the MH-MA Admission Office with any questions. Thank you for your assistance.

School Name:

Name:

Title/Position:\_\_\_\_\_

How long have you known the student?:

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

	Outstanding	Above Average	Average	Below Average	Don't Know
Relationship with peers					
Relationships with parents					
Respect for authority					
Maturity					
Concern for others					
Self-confidence					
Dependability					
Exercises good judgment					
Self-esteem appearance					
Leadership ability					
Cooperation					
Intellectual ability					
Attendance					
Extracurricular activities					

Yes No

Is the student in good standing and eligible to reenter your school if you offer the next grade level?	
Has there been any discipline issues or action taken with the student?	
Has the candidate been involved with alcohol or drugs?	
Does the candidate have any physical or emotional limitations?	
Are the parents cooperative?	

How would you compare this student to others you have observed in similar circumstances?

	Outstanding Excellent Above Average Good Fair Below Average				
I recommend	this student be a	admitted to Maur Hill – M	ount Academy:		
Enthusiastical	lly:	Confidently:	With Reserva	ation:	Do Not:
Please feel fre	ee to write any a	dditional comments pertai	ning to this studer	ıt:	
Signature:				Date:	

Thank you for your time and consideration. Please forward this form to the Admission Office at Maur Hill - Mount Academy.

Mail:	Email:
Maur Hill - Mount Academy c/o Admission Office 1000 Green St. Atchison, KS 66002	Maur Hill – Mount Academy Admission Office admissions@mh-ma.com