

This form can be completed by a principal, guidance counselor, coach, club supervisor, or special-area teacher. The student below has applied for admission to Wellington. Your comments will remain strictly confidential.

Please return this form directly to the Admissions Office. Thank you for taking the time to complete this recommendation form. We appreciate your prompt response.

Name of student \_\_\_\_\_ Application for grade \_\_\_\_\_

How long and in what capacity have you known the candidate? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please describe the effect the candidate has had on the school and/or the community. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has the candidate ever been suspended or subject to other disciplinary action?  Yes  No

Please explain. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please describe the candidate's academic ability and engagement. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What do you feel are the candidate's strengths? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What do you feel are the candidate's needs? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CONFIDENTIAL GENERAL RECOMMENDATION (Continued)**

Please indicate any school and community activities in which you know the student has participated. \_\_\_\_\_

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How does the candidate relate to peers? \_\_\_\_\_

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How does the candidate relate with adults? \_\_\_\_\_

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Would you recommend this candidate?  Yes  No

Please explain. \_\_\_\_\_

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Print Name \_\_\_\_\_ Title \_\_\_\_\_

School Name \_\_\_\_\_ School Phone \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

School Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Email \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_