



# FLUSHING CHRISTIAN SCHOOL

## Teacher's Recommendation Form

To be completed by student's previous teacher.

Teachers may email the completed form directly to Ms. Janet Garcia at [JGARCIA@FCSNYC.ORG](mailto:JGARCIA@FCSNYC.ORG)

\_\_\_\_\_ (student's name) has applied for admission to Flushing Christian School. Please complete the reference form below and return in the envelope provided. Please rate the child on a scale of one to five. (One = poor and five = excellent)

Follows instructions:            1    2    3    4    5

Accepts responsibility:        1    2    3    4    5

Is considerate of others:      1    2    3    4    5

Is consistent in work:         1    2    3    4    5

Works to ability:              1    2    3    4    5

Respects authority:          1    2    3    4    5

Uses time wisely:             1    2    3    4    5

Practices self- control:        1    2    3    4    5

Appropriately mature:        1    2    3    4    5

Gets along well with others: 1    2    3    4    5

Reading Grade Equivalent: \_\_\_\_\_

Math Grade Equivalent: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Teacher's Name (Please Print) : \_\_\_\_\_

Teacher contact email or phone number: \_\_\_\_\_

Name of School : \_\_\_\_\_

Teacher's Signature: \_\_\_\_\_