



Toco Hills Home Tutoring

Where homeschool children have a choice in education

Toco Hills Home Tutoring  
P.O. Box 15375  
Atlanta, GA 30333  
404-538-6545

## Recommendation Form: Elementary

Please sign and deliver this form to your child's Teacher and Head of School:

My child is applying for admission to Toco Hills Home Tutoring. I hereby give permission for you to release the following information concerning my child.

Student's Name \_\_\_\_\_

Birth Date \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_

**To the Teacher and Head of School:** We appreciate your time, cooperation and honesty in completing this form. Information that does not appear on school records is most helpful in enabling us to evaluate the applicant. Your input regarding the student's abilities and needs helps us determine whether our program is right for the applicant. This information is strictly confidential. It is used only in evaluating applicants and does not become part of their permanent records. Thank you for your assistance.

**Please return this form to:**  
Toco Hills Home Tutoring  
P.O. Box 15375, Atlanta, GA 30333  
404-538-6545

### To be completed by the Teacher:

How long have you known this student? \_\_\_\_\_ years \_\_\_\_\_ months

What are the first few words that come to mind when you think of this student? \_\_\_\_\_

What do you consider to be the student's greatest strengths? \_\_\_\_\_  
\_\_\_\_\_

What do you consider to be the student's greatest challenges? \_\_\_\_\_  
\_\_\_\_\_

## **Academic and Work Habits**

### **Reading**

Reads phonetic words? Yes \_\_\_\_\_ No \_\_\_\_\_

Reads words with phonograms? Yes \_\_\_\_\_ No \_\_\_\_\_

Recognizes puzzle words? Yes \_\_\_\_\_ No \_\_\_\_\_

Name some books the student has read or is currently

\_\_\_\_\_

Does the student comprehend what is read?

Always \_\_\_\_\_ Sometimes \_\_\_\_\_ Rarely \_\_\_\_\_

### **Math**

Please list the math materials/lessons that the student is currently working on successfully.

\_\_\_\_\_

\_\_\_\_\_

### **Writing**

Does the student write in complete sentences? Yes \_\_\_\_\_ No \_\_\_\_\_

Beginning sentences or fluent sentences? \_\_\_\_\_

How well does the student write stories? \_\_\_\_\_

\_\_\_\_\_

Does the student typically write in cursive? Yes \_\_\_\_\_ No \_\_\_\_\_

	Usually	Sometimes	Rarely
<b>Pursues tasks to completion/perseveres in spite of difficulty</b>			
<b>Grasps concepts quickly</b>			
<b>Demonstrates intellectual curiosity</b>			
<b>Follows oral direction</b>			
<b>Enjoys complex tasks or ideas</b>			
<b>Exhibits a variety of interests</b>			
<b>Follows written direction</b>			
<b>Plans and uses time well</b>			
<b>Works well with others</b>			
<b>Is a self-starter</b>			

Please describe this student's learning style? \_\_\_\_\_

\_\_\_\_\_

***Please include typical work samples for writing and math.***

## **Social and Emotional Development**

	Usually	Sometimes	Rarely
<b>Gets and maintains the attention of adults in acceptable ways</b>			
<b>Is self-confident with peers and adults</b>			
<b>Expresses emotions appropriately</b>			
<b>Respects classroom and property</b>			
<b>Cooperates well in a group</b>			
<b>Respects classroom routines</b>			
<b>Handles conflicts with peers appropriately</b>			
<b>Leads peers</b>			
<b>Follows peers</b>			
<b>Is respectful of adults</b>			
<b>Transitions easily between activities</b>			
<b>Shows empathy and tolerance towards others</b>			

Please describe this student's personality or temperament. \_\_\_\_\_

\_\_\_\_\_

How do the parents contribute to your class and the school community?

\_\_\_\_\_

\_\_\_\_\_

Do the parents attend school conferences and parent education meetings?

\_\_\_ Yes \_\_\_ No

If the student were eligible to continue in your program, would you invite him/her to return next year? Yes \_\_\_ No \_\_\_

Yes on the condition that:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

May we contact you if you if we have any questions or need clarification?

Yes \_\_\_\_\_ No \_\_\_\_\_

Phone: \_\_\_\_\_ Convenient time to call: \_\_\_\_\_

**Name of Teacher** \_\_\_\_\_

**Signature of Teacher** \_\_\_\_\_

**Date** \_\_\_\_\_

## To be completed by the Head of School:

	Usually	Sometimes	Rarely
Attends parent conferences			
Participates in school activities			
Meets financial obligations			
Cooperates with school policies and procedures			
Communicates peacefully and with a positive manner			

### I recommend this student:

enthusiastically  with confidence  with reservation

\*Reason not recommending: \_\_\_\_\_

\_\_\_\_\_

Any additional comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Head of School \_\_\_\_\_

Signature of Head of School \_\_\_\_\_

Date \_\_\_\_\_

Name of school and address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_