



THE CALVERTON SCHOOL
 A Preschool – Grade 12 College Preparatory School
 Prepare to Succeed

Homeroom Teacher Recommendation Form - Students Entering First Grade through Fifth Grade
Please do not complete this form before November 15th. Return by January 15th.

Name of Child _____

To the Teacher: The student above is applying for admission to The Calverton School. As part of the admission process, please assess the student as compared to their peers. We appreciate your time and effort in completing this evaluation. Be assured that all of the information you provide will be held in strictest confidence. Please send this form, or a copy, directly to the Office of Admissions.

| Personal Attributes | Outstanding | Age-Appropriate | Needs Development |
|--------------------------------------|--------------------|------------------------|--------------------------|
| Conduct | | | |
| Consideration for Others | | | |
| Relationship with Peers | | | |
| Leadership Ability | | | |
| Emotional Maturity | | | |
| Self Confidence | | | |
| Sense of Humor | | | |
| Integrity | | | |
| Sense of Responsibility | | | |
| Relationship with Adults | | | |
| Academic Attributes | Outstanding | Age-Appropriate | Needs Development |
| Study Habits | | | |
| Organization of Time and Work | | | |
| Intellectual Curiosity | | | |
| Attention Span | | | |
| Ability to Express Ideas Orally | | | |
| Ability to Follow Directions | | | |
| Ability to Work in Groups | | | |
| Ability to Work Independently | | | |
| Ability to Grasp New Concepts | | | |
| Reasoning/Problem Solving | | | |
| Perseverance | | | |
| Reading Skills | | | |
| Writing Skills | | | |
| Math Skills | | | |
| Future Academic Potential | | | |
| Community Involvement | Outstanding | Good | Poor |
| Parent Cooperation | | | |
| Parent Involvement in School Affairs | | | |
| Attendance | | | |

For a School Administrator or Business Office

Has the family satisfied all financial obligations to your school? Yes No Initials _____
 (Many AIMS schools will not enroll a student until the family has met all financial obligations to the school previously attended by the student.)

The Calverton School
 300 Calverton School Road Huntingtown, MD 20639
 Phone: 410.535.0216 Fax: 410.535.6169



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Math Recommendation Form - Students Entering First Grade through Fifth Grade

To the Teacher: The student above is applying for admission to The Calverton School. As part of the admission process, please assess the student as compared to their peers. We appreciate your time and effort in completing this evaluation. Be assured that all of the information you provide will be held in strictest confidence. Please send this form, or a copy, directly to the Office of Admissions.

Name of Student _____

Name of School _____ Present Grade _____

How well do you know the student academically? _____ Personally _____

What are the first words that come to mind when describing this candidate?

Briefly describe your class? What textbooks are used in your classroom? What content is covered?

Please list applicant's Math strengths and weaknesses.

Please comment on this student's learning style, noting any special needs and any observed discrepancies between academic ability and classroom performance.

Has outside help, enrichment, tutoring or testing been recommended? If yes, please elaborate.

Additional Comments:

Please circle the words that describe this student:

| | | | | | |
|------------|--------------|--------------------|--------------|------------------|--------|
| Aggressive | Confident | Easily Frustrated | Insightful | Negative Leader | Shy |
| Anxious | Cooperative | Easily Discouraged | Irritable | Overprotected | Social |
| Articulate | Dishonest | Follower | Independent | Positive Leader | _____ |
| Assertive | Disobedient | Honest | Manipulative | Self-Centered | _____ |
| Cheerful | Distractible | Independent | Motivated | Self-Disciplined | _____ |

Please check if you wish to discuss this candidate by telephone Best time to call _____

Has this student been evaluated for any physical, emotional, or academic reasons? Yes ___ No ___ Don't know ___

Is this student currently on medication or previously been on medication? Yes ___ No ___ Don't know ___

Have you observed any signs of learning disabilities? Yes ___ No ___ Don't know ___

Please note any special attributes that would help us to better understand and evaluate this student (i.e., English as a second language, special talent in arts or athletics, etc.) _____

Name: _____ Position: _____ Telephone: _____

Signature: _____ Date: _____



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Language Arts Recommendation
For Students Entering First Grade through Fifth Grade

To the Teacher: The student above is applying for admission to The Calverton School. As part of the admission process, please assess the student as compared to their peers. We appreciate your time and effort in completing this evaluation. Be assured that all of the information you provide will be held in strictest confidence. Please send this form, or a copy, directly to the Office of Admissions.

Name of Student _____

Name of School _____ Present Grade _____

How well do you know the student academically? _____ Personally _____

What are the first words that come to mind when describing this candidate?

Briefly describe your class? What textbooks are used in your classroom? What content is covered?

Please list applicant's Language Arts strengths and weaknesses.

Please comment on this student's learning style, noting any special needs and any observed discrepancies between academic ability and classroom performance.

Has outside help, enrichment, tutoring or testing been recommended? If yes, please elaborate.

Additional Comments:

Please circle the words that describe this student:

| | | | | | |
|------------|--------------|--------------------|--------------|------------------|--------|
| Aggressive | Confident | Easily Frustrated | Insightful | Negative Leader | Shy |
| Anxious | Cooperative | Easily Discouraged | Irritable | Overprotected | Social |
| Articulate | Dishonest | Follower | Independent | Positive Leader | _____ |
| Assertive | Disobedient | Honest | Manipulative | Self-Centered | _____ |
| Cheerful | Distractible | Independent | Motivated | Self-Disciplined | _____ |

Please check if you wish to discuss this candidate by telephone Best time to call _____

Has this student been evaluated for any physical, emotional, or academic reasons? Yes _____ No _____ Don't know _____

Is this student currently on medication or previously been on medication? Yes _____ No _____ Don't know _____

Have you observed any signs of learning disabilities? Yes _____ No _____ Don't know _____

Please note any special attributes that would help us to better understand and evaluate this student (i.e., English as a second language, special talent in arts or athletics, etc.) _____

Name: _____ Position: _____ Telephone: _____

Signature: _____ Date: _____

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REQUEST FOR TRANSCRIPT

Please submit this form directly to the student's present school.

Name of Student(s): _____

Name of School: _____ Present Grade(s): _____

Address of School: _____

Telephone Number: _____

Registrar: Please include the record of all academic history– to include academic records and report cards, academic achievements and awards, attendance records, behavioral records, and any standardized aptitude/achievement testing and a copy of the student's most recent report card.

As the parent/guardian of the above named student(s), I authorize release of their transcripts to:

Office of Admissions
The Calverton School
300 Calverton School Road
Huntingtown, MD 20639

Fax: 410-535-6169
Phone: 410-535-0216

I hereby authorize release of my child's school records.

Parent Signature

Date