



**To be completed by Classroom Teacher:**

(Applicant Name) \_\_\_\_\_, Applying for grade \_\_\_\_\_ is a Candidate for admission to the Newark Boys Chorus School. Your honest assessment of the applicant will be helpful to the admission committee. All remarks will be kept strictly confidential. **Please complete the entire form** and return it to the Newark Boys Chorus School.

1. Applicant is currently in grade \_\_\_\_\_
  
2. How long have you known the applicant? \_\_\_\_\_
  
3. I am currently teaching the applicant in the following subjects: \_\_\_\_\_  
\_\_\_\_\_
  
4. What words or phrases immediately come to mind when describing the applicant? \_\_\_\_\_  
\_\_\_\_\_
  
5. What are the applicant's major strengths? \_\_\_\_\_  
\_\_\_\_\_
  
6. What are the applicant's major weaknesses? \_\_\_\_\_  
\_\_\_\_\_
  
7. Additional Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**Newark Boys Chorus School**  
 Inspiring Excellence in Academics & Music Since 1969

In relation to others in the applicant's age group whom you have known, please rate the candidate by placing an (X) in the appropriate columns.

	Excellent	Good	Average	Below Average	Poor	N/A
<b>Motivation</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Initiative</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Class Participation</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Work Habits</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Growth Potential</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Homework Quality</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Teamwork</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Classroom Behavior</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Follows Directions</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Respect for Others</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Leadership Ability</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Resilience</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Intellectual Curiosity</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Overall Performance</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Teacher's Name: \_\_\_\_\_

Current school: \_\_\_\_\_

School phone number: \_\_\_\_\_

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