



# HIGHLAND RIM ACADEMY

## TEACHER REFERENCE LETTER

**Section I. To be completed by a parent.**

Student's Name & Grade Applying to: \_\_\_\_\_

Parents' Names: \_\_\_\_\_

**Section II. To be completed by an authorized staff person at the school where the student is currently or was previously enrolled.**

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

Address: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

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

Principal's Name: \_\_\_\_\_

In what capacity and for how long have you known the applicant? \_\_\_\_\_

*Please indicate your ratings by numbers in the right-hand column. Use a question mark where you have insufficient evidence. Your comments will be held in the strictest confidence and not shared with parents.*

	1	2	3	4	5	Ratings
<b>Academic Potential</b>	Exceptionally Promising Student	Generally Strong Student	Average Student, Capable of Satisfactory Work	Below Average: <input type="checkbox"/> Marginal Ability <input type="checkbox"/> Lacks Motivation	Questionable Candidate	
<b>Personal Qualities</b>	Outstanding, Leads and Participates	Generally Strong	Average	Below Average, Immature	Very Immature for Age	
<b>Emotional Stability</b>	Exceptionally Stable	Well Balanced	Generally Well Balanced	<input type="checkbox"/> Excitable <input type="checkbox"/> Unresponsive <input type="checkbox"/> Distractible	<input type="checkbox"/> Hyperemotional <input type="checkbox"/> Apathetic	
<b>Summary</b>	<b>OUTSTANDING</b>	<b>ABOVE AVERAGE</b>	<b>AVERAGE</b>	<b>BELOW AVERAGE</b>	<b>POOR</b>	

1. Please comment on the applicant's attitude toward school: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. To your knowledge, has the applicant had any history of involvement with substance abuse or juvenile delinquency? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

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3. Has the applicant ever been suspended or expelled? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

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4. To your knowledge, has the applicant had any history of conduct or behavior problems?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

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5. Does the applicant currently have an IEP? If not, should they have one, in your opinion?

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6. Additional comments, if needed:

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Teacher or Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*The admissions application will be held until this letter of recommendation has been submitted.  
Please submit this letter directly to Highland Rim Academy, ATTN: Admissions Office, PO Box 3022, Cookeville,  
TN, 38502.*