

OUR LADY ACADEMY



Developing DYNAMIC Christian Women since 1971

TEACHER/COUNSELOR RECOMMENDATION

Students : _____

The student named above has applied for admission to Our Lady Academy. Please complete this form to the best of your knowledge. Please use your professional judgment in answering these questions. Please confer with colleagues to ascertain information, if necessary. Thank you.

Recommender's Name: _____

Title: _____ Contact Number _____

School: _____

Street Address: _____

City: _____ State _____ Zip _____

1. How long has the student been enrolled in your school? _____

2. How long have you known the student, and in what capacity? _____

3. Does the applicant possess the ability to complete a college prep curriculum? _____

4. Has the student had any history of serious conduct problems? _____

If yes, please explain _____

5. Has the applicant ever been expelled or suspended? _____ Yes _____ No

If yes, please explain _____

6. Will the applicant be permitted to re-enroll in your school? _____ Yes _____ No

If no, please explain _____

7. Please comment on the applicant's overall attitude toward school _____

8. To your knowledge, has the applicant had any history of involvement with drugs, alcohol or juvenile delinquency problems? _____ Yes _____ No

If yes, please explain _____

9. Are you aware of any type of Learning Disability? _____ Yes _____ No
If yes, please explain _____

10. What is your candid estimation of the candidate's moral character? _____

11. To your knowledge will the applicant take good advantage of the curricular and extracurricular activities offered by Our Lady Academy? _____

12. Please complete the appropriate blanks. Please confer with colleagues to make your recommendations.

	Below Average	Average	Good	Excellent	Outstanding	No Basis for Judgment
Motivation						
Creative Qualities						
Self - Discipline						
Growth Potential						
Leadership						
Self Confidence						
Personal Appearance						
Warmth/Personality						
Sense of Humor						
Concern for Others						
Energy						
Personal Initiative						
Reaction to Setback						
Respect for Authority						
Physical Condition						

13. Additional comments: _____

Signature _____ Date: _____

Please return this form to Our Lady Academy by one of the following:

Fax: (228) 467-1666

Mrs. Marilyn Pigott, Principal

Email: marilyn.pigott@ourladyacademy.com

Mail: Our Lady Academy

Attention: Admissions Office

222 South Beach Boulevard

Bay Saint Louis, MS 39520