

THE CAMBRIDGE CHECKPOINT PREPARATORY ACADEMY

at Sacajawea and Lakota Middle Schools

Teacher Recommendation Form

Teachers: Please complete the information requested below. Return this form (via school courier) to the Cambridge Coordinator, Doug Mosebach, at either Lakota or Sacajawea.

Student's Name _____ **Current Middle** _____

Current Elementary/Middle School _____

Teacher Name (Print) _____

Teacher Signature: _____

Choose one:

_____ Language Arts/English teacher (Grade Level: _____)

_____ Mathematics teacher (Course name: _____)

_____ Science teacher (Course name: _____)

Student's first semester grade _____

Evaluation:

Category	Top 5%	Above Average	Average	Below Average	No Basis for Judgment
Academic Ability					
Motivation/Self-Discipline					
Confidence					
Ability to Work with Others					
Leadership					
Respect for Classmates					
Respect for Faculty					
Time Mgmt/Organization					

Comments:

Recommendation: (Choose one)

Strongly Recommend _____ **Recommend** _____ **Not Recommend** _____

Deadline for Application: April 15, 2008