



CROSS CREEK CHRISTIAN SCHOOL
STUDENT RECOMMENDATION FORM
 (Academic- English and Mathematics or Science)

_____ is applying for admission to Cross Creek Christian School. Your insight and knowledge of this student will assist us in determining his/her potential success. **All information will be kept in strict confidence.**

Please return this form directly to the school office. This form should not be returned to the student or parent. Thank you for your evaluation.

Please check the area that best represents your opinion. Leave the space blank if you do not have any knowledge of that particular area.

		<i>Excellent</i>	<i>Good</i>	<i>Average</i>	<i>Poor</i>
1.	Work Habits				
2.	Promptness with assignments				
3.	Academic achievement in relation to ability				
4.	Age appropriate behavior				
5.	Healthy relationships with peers				
6.	Shows respect for authority				
7.	Self-disciplined				
8.	Trustworthiness				
9.	Participation in extracurricular activities				
10.	Cooperation of parents				
11.	Regular attendance				
12.	Response to discipline				

Would you recommend this student for admission? Yes No

I have known this student _____ year(s). Courses taught this applicant: _____

Academic year(s): _____ School: _____

Please relate to us any pertinent information which you feel would be helpful to us in evaluating this student and his/her eligibility for our school.

Name (please print): _____

Signature: _____

Date: _____

Please return this form directly to:
Cross Creek Christian School
501 E. North Street
Sweetwater, TN 37874