

# All Saints Episcopal Day School



## Teacher Recommendation Form for Nursery, Pre-K, K, Grade 1

Name of Student: \_\_\_\_\_ Present Grade: \_\_\_\_\_

To the Teacher: The student named above is applying for admission to All Saints Episcopal Day School. Our ability to effectively evaluate this student is helped considerably by your timely and candid insights. *All information provided will be kept confidential.* Please return this form by January 15<sup>th</sup> (January 4<sup>th</sup> for those requesting Early Notification). If you wish to add to this form, please contact our Director of Admissions at [admissions@allsaintsdayschool.org](mailto:admissions@allsaintsdayschool.org) or (201) 792-6292.

Name of Teacher: \_\_\_\_\_ Name of school: \_\_\_\_\_

School address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

*Please check the appropriate response and comment as needed.*

<b>SOCIAL DEVELOPMENT</b>				
	Not yet	Sometimes	Usually	Comments
Can be a friend				
Is kind to peers				
Is comfortable with adults				
Plays independently				
Cooperates in play				
Shares well				
Adapts well to new situations				
Initiates play activities				
Is imaginative				
Has the capacity to lead				
Has the capacity to follow				
Uses materials purposefully				
Physical Development				

<b>SCHOOL READINESS SKILLS</b>				
	Not yet	Sometimes	Usually	Comments
Can pay attention				
Listens in a group				
Participates in group discussions				
Follows directions				
Works cooperatively				
Respects property of others				
Transitions well				
Demonstrates curiosity				
Expresses ideas well				
Enjoys school				
Is willing to try new things				

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PHYSICAL DEVELOPMENT				
	Area of Strength	Appropriate	Area of Challenge	Comments
Fine motor skills				
Gross motor skills				
Speech skills (articulation)				

Please comment on any areas of interest regarding this applicant: strengths, challenge areas, recent accomplishments, health or special needs.

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Please comment on any relevant experience with **online** learning, e.g., interest, engagement, participation, etc.:

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**For kindergarten and first grade applicants, please describe:**

### Reading Readiness Skills

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### Math Readiness Skills

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**Thank you for your honest and confidential assessment of this student.**

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

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

**Please return recommendation to:**

Admissions Office  
All Saints Episcopal Day School  
527 Clinton Street  
Hoboken, NJ 07030  
Telephone: 201.792.6292  
Email: admissions@allsaintsdayschool.org  
Fax: 201.792.1595