



HOLY FAMILY CATHOLIC SCHOOL
"Shaping lives and creating a bright future together in faith, knowledge and love."

**STUDENT REFERENCE
 INFORMATION**

Teacher, Principal or Guidance Counselor Reference (Grades 1 – 8):

The student named below has applied to Holy Family Catholic School. Your evaluation of the application will be an invaluable tool in our admission process. The applicant's file is not considered complete without the return of this form, a record of current and last year's marks, and standardized test scores for achievement and ability. Your remarks will be kept confidential. Thank you for your prompt assistance.

In order to guarantee confidentiality, this form will be destroyed and not placed in the applicant's file.

Name of Applicant: _____ **Current Grade:** _____

Date Student Entered: _____ **How long have you known him/her?** _____

Based on your personal experience and knowledge of this student, please circle the appropriate response:

	Below Average	Average	Above Average	Outstanding
Academic potential	1	2	3	4
Academic Achievement	1	2	3	4
Dependability	1	2	3	4
Conduct and Discipline	1	2	3	4
Respect accorded by faculty	1	2	3	4
Leadership Potential	1	2	3	4
Personal Integrity	1	2	3	4
Concern for others	1	2	3	4
Overall recommendation as a student	1	2	3	4
Overall recommendation as a person	1	2	3	4

Has the applicant had any disciplinary problems? YES / NO

If yes, explain:

Has the applicant received any special educational services? YES / NO

If yes, please explain when and where:



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 A Blue Ribbon School**



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Does the applicant have an unusual number of absences from school?
If yes, please explain:

YES / NO

Please provide any other information, which you feel, will be useful in our assessment of this applicant. Your comments are, of course, confidential. If you wish to discuss this applicant personally, please contact the Admissions Office at (407) 876-9344.

Are the parents supportive of your school and school policies? YES / NO

Please indicate the strength of your recommendation regarding this student's candidacy for admission by checking the appropriate responses.

RECOMMEND:

Enthusiastically _____ Strong _____ Fairly Strong _____ Without Enthusiasm _____ Do not recommend _____
Explanation:

Your Name: _____ **Date:** _____

School: _____ **Position:** _____

School Address/Phone: _____

PLEASE RETURN FORM TO: Holy Family Catholic School
5129 S. Apopka-Vineland Rd.
Orlando, FL 32819
Attn: Sr. Dorothy Sayers, M.P.F.
Principal



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