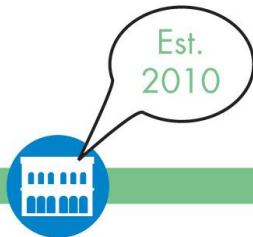




MC² HIGH SCHOOL
MILWAUKEE COLLEGE & CAREER
HIGH SCHOOL

A program of Seeds of Health, Inc.



MC² High School
131 South 1st Street
Milwaukee, WI 53204
tel 414.308.1230
fax 414.308.1231

Confidential Recommendation Form

Student Information:

Current School:

Teacher/Administrator:

Last Name:

First Name:

Teacher/Administrator: This student is applying for admission to MC² High School. Please complete the form below and return to Stephanie Steinbach at MC² High School via fax at 414.308.1231, email to ssteinbach@seedsofhealth.org, or mail to the address above.

Please check one rating for each item below:

	Excellent	Good	Fair	Poor
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to communicate verbally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to communicate in writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to solve problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please provide the following student information:

- Academic Performance: _____

- Character: _____

- Other: _____

Signature of Subject Area Teacher

Subject Area

Date

****Please attach a copy of the student's most recent statewide or benchmark testing results (e.g. MAP, STAR, Wisconsin Forward Exam).**

This institution is an equal opportunity provider.