



**HOLY FAMILY SCHOOL
KINDERGARTEN RECOMMENDATION FORM**

Date _____

Dear Pre-K School Teacher:

_____ has applied for admission into Kindergarten at Holy Family School, a Catholic elementary school. Our admission policy requires an evaluation from the current pre-school. All evaluations are confidential and will be used solely to determine suitability for admission placement.

Please return this evaluation to Holy Family School at the below address:

**Holy Family School
Attention: Admissions
4850 Pearl Avenue
San Jose, CA 95136**

Thank you for your help and assistance.

Sincerely,

Holy Family School



PRE-SCHOOL EVALUATION
Please rate from 1 -5 (5 is high)

Student Name: Student Age:	1	2	3	4	5
Student separates easily from parents	1	2	3	4	5
Student can work independently	1	2	3	4	5
Student practices self-control in the classroom	1	2	3	4	5
Student can follow directions	1	2	3	4	5
Student interacts well with peers	1	2	3	4	5
Student can recognize letters	1	2	3	4	5
Student can recognize letter sounds	1	2	3	4	5
Parents are supportive of the teacher	1	2	3	4	5

Does the student have any physical, academic or emotional problems of which you are aware? If yes, please comment.

___ Yes ___ No _____

Is the student able to remain on task?	YES	NO
Is the student focused in a small group?	YES	NO
Does this student have good self-concept?	YES	NO
Does this student have good auditory recall?	YES	NO
Does this student speak clearly?	YES	NO

Any other comments: _____

Student is:

- Highly Recommended
- Recommended
- Recommended with reservation
- Not Recommended

Print Name _____ Signature _____ Date _____

Position _____ School _____