The Wheeler School Teacher Recommendation for Middle and Upper School*

Current Mathematics Teacher

TO THE STUDENT: Please print your name, address and school below and give this form and a stamped envelope, addressed to The Wheeler School, to your current mathematics teacher.

Student's namelast			
last	first	middle	grade apply
Student's address			
Current School			
			mittee places considerable weight on the academic and personal e your most candid and thoughtful responses.
How well do you know the studer	nt academically?	As	a person?
In what years did you teach the st	tudent?		
What course(s)?			
Briefly describe your course. It is	especially helpful to know what	t texts are used and if the studer	nts are grouped by ability.
Is this course part of a tracking sy	vstem or designated as an honors	or accelerated course: ye	28 no
			mathematics curriculum in many American secondary schools. Plet school year.
check those courses or list others	which the student will have com	pleted by the end of the curren	
check those courses or list others Basic First Year Algebra (o	which the student will have com	of rational expressions, irration	t school year.
check those courses or list others Basic First Year Algebra (o	which the student will have com does not include extensive study	of rational expressions, irration	t school year.
check those courses or list others Basic First Year Algebra (First Year Algebra (a thoro	which the student will have com does not include extensive study ough course which included quad	of rational expressions, irration	t school year.
check those courses or list others Basic First Year Algebra (a First Year Algebra (a thoro Geometry Second Year Algebra (not	which the student will have com does not include extensive study ough course which included quad	pleted by the end of the curren of rational expressions, irration dratics)	t school year.
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	Truly Outstanding	Excellent	Above Average	Average	Below Average	No Basis for Judgment
Knowledge of the basic skills						
Accuracy in the use of basic skills						
Problem solving ability						
Reasoning ability						
Understanding of and appreciation for the underlying ideas and concepts						
Effort						
Overall Performance						
Willingness to accept the challenge of the more difficult problems and exercises						
Command of mathematics when compared to other students whom you have taught						

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught.

	One of the top few I have ever encountered	Excellent (Top 10% this year)	Good (Above Average)	Average	Below Average	No basis for Judgment
Academic Potential						
Academic Achievement						
Intellectual Curiosity						
Effort/Determination						
Ability to Work Independently						

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught.

	One of the top few I have ever encountered	Excellent (Top 10% this year)	Good (Above Average)	Average	Below Average	No basis for Judgment
Organization						
Creativity						
Willingness to Take Intellectual Risks						
Concern for Others						
Honesty/Integrity						
Self-esteem						
Maturity (relative to age)						
Responsibility						
Respect Accorded by Faculty						
Respect Accorded by Peers						
Emotional Stability						

If the student is relatively weak or strong in any areas listed above, please elaborate.

What are the first three words that come to mind to describe this student?

In what way has the student made significant contributions to your community?

Please add any additional information that will give us a more complete picture of the student.

Thank you for taking your valuable time to complete this evaluation. Your reflections are an important part of the candidate's application. All information you provide will be held in confidence and only disclosed to members of the Admission Committee or others considered necessary by the Director of Admission.

Signature	Date	Mailing Address
Printed Name		E-Mail Address
Title		() Telephone

* based on The Common Recommendation Form developed by The Ten Schools Group