



# CONFIDENTIAL TEACHER REFERENCE MATH (GRADES 7 – 12)

4241 Central Church Road | Douglasville, GA 30135 | Phone: 770-942-1583 | Fax: 770-942-9332  
[www.harvesteracademy.com](http://www.harvesteracademy.com)

## PARENT

*Please sign this waiver and submit this form to the applicant's math teacher. Thank you.*

Applicant's Name \_\_\_\_\_ Current Grade Level \_\_\_\_\_

My child is an applicant for admission to Harvester Christian Academy. I hereby authorize you to release to Harvester Christian Academy the following confidential reference form that you should mail directly to Harvester Christian Academy Admissions Office. I waive my right to review the information provided on this form.

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Signature of Parent	Name of Parent (please print)	Date
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## Math Teacher

Please assess the above named student in relation to peers in his/her present school. Additional comments are appreciated and may be attached separately. Return this form to **Harvester Christian Academy Admissions Office**, 4241 Central Church Road, Douglasville, GA 30135. Thank you.

Academic Characteristics	Excellent	Above Average	Average	Below Average	Not Applicable
Facts/Computation Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concepts/Problem Solving Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude toward Subject	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Abstract Thought	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work Independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organization/Neatness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Study Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completion of Work on Time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Personal Characteristics</b>	<b>Excellent</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Not Applicable</b>
Peer Relations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect for Authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to Criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of Humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Please make a short comment on the following:**

Parental support and involvement \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has outside help been recommended?     Yes     No    Been given?     Yes     No    Please elaborate.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's social and emotional development compared with others of the same chronological age. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe how well the applicant is respected by adults/peers. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**In summary, I recommend this applicant for admission to Harvester Christian Academy**

	<b>Enthusiastically</b>	<b>Strongly</b>	<b>Moderately</b>	<b>With Reservations</b>
Academic Promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character and Personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I have known him/her for \_\_\_\_\_ years.

Name of school \_\_\_\_\_ Grade \_\_\_\_\_

Teacher's name (please print) \_\_\_\_\_

\_\_\_\_\_  
Signature Position Date

\_\_\_\_\_  
School Address Telephone

\_\_\_\_\_  
City State Zip