

Bay Knoll School Seventh-day Adventist School

Student Reference Form

New York Conference of Seventh-day Adventist School System

Prospective Student's Name: _____ **Date of Reference:** _____

Bay Knoll Seventh-day Adventist School is interested in teaching students that have a desire to learn, a solid academic record, a positive attitude, and a willingness to abide by the school rules.

Please complete the following reference sheet keeping the above in mind. We will keep your response in strict confidence as we use this sheet to help determine the above-named prospective student's compatibility with our school environment. Thank you for your help!

GENERAL REFERENCE (NON-TEACHER REFERENCE):

1. How long have you known the applicant and in what capacity? _____

2. Please circle the number that best applies for each category:

	Outstanding	Above Average	Average	Below Average	No Opportunity to Observe
Work ethic / motivation	1	2	3	4	5
Imagination / creativity	1	2	3	4	5
Ability to think / act independently	1	2	3	4	5
Honesty / integrity	1	2	3	4	5
Maturity	1	2	3	4	5
Responsibility for actions	1	2	3	4	5
Concern for others	1	2	3	4	5
Leadership ability	1	2	3	4	5
Relationship with peers	1	2	3	4	5
Relationship with parents	1	2	3	4	5
Relationship with other adults	1	2	3	4	5
Reaction to suggestions	1	2	3	4	5
Reaction to criticism	1	2	3	4	5
Ability to meet commitments	1	2	3	4	5

Please explain any response rated 4: _____

Other useful comments or information: _____

Evaluator's name (please print): _____

Signature: _____

Title/Relationship: _____ Telephone: () _____ - _____

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TEACHER REFERENCE (TEACHER OF PROSPECTIVE STUDENT COMPLETE THIS SECTION):

**Please attach additional paper if needed to complete answers below.*

1. In what level or range academically does this applicant fall compared to other students at your school?

(Please Circle Your Answer): Bottom 10% | 10-25% | 25-50% | 50-75% | 75-90% | Top 10%

2. Does the applicant come to class prepared? YES | NO

3. Does the applicant actively participate in class? YES | NO

4. What do you perceive as the applicant's greatest strength? _____

5. What do you perceive as the applicant's greatest need? _____

6. Please list any extracurricular activities that you are aware of the applicant participating in (music, sports, church activities, etc.)? _____

7. Has the applicant had any disciplinary difficulty you are aware of? YES | NO

8. If yes to #7 (above), please relate the incident(s) and any disciplinary action that resulted? _____

9. Does the applicant have an IEP or an educational evaluation? YES | NO

10. Has the student ever been identified as gifted or with special talents? YES | NO

11. If yes to #10 (above), please describe? _____

12. Has the applicant ever received supplemental support in reading, writing, math, or speech/language intervention? _____

Thank you for taking the time to complete this evaluation. If you have any questions please contact our teachers at (585) 467-2722

Please return this Reference Form to: Bay Knoll SDA School
(Reference Form)
2639 E. Ridge Rd.
Rochester, NY 14622