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## STUDENT INFORMATION FORM

(For Current Teacher of Student Entering Grades K-8)

The admissions office would greatly appreciate your cooperation in giving as full an appraisal as possible of this student's performance. These comments are especially helpful in assessing an applicant's qualifications. The more information we have, the better we can meet the needs of this child. Please complete and return the recommendation to our admissions office at your earliest convenience. Thank you.

Student Name: \_\_\_\_\_

Current School: \_\_\_\_\_

Address: \_\_\_\_\_

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

Parent/Guardian Signature: \_\_\_\_\_

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### The following is to be completed by the student's current teacher:

1. What grade placement do you recommend for the coming school year? 8<sup>th</sup> Grade Honors
2. Has the student ever been recommended for or identified as needing:
  - a. Psychological testing Yes \_\_\_\_\_ No \_\_\_\_\_
  - b. Educational testing Yes \_\_\_\_\_ No \_\_\_\_\_
  - c. Special education Yes \_\_\_\_\_ No \_\_\_\_\_
  - d. Gifted program Yes \_\_\_\_\_ No \_\_\_\_\_
  - e. Grade retention Yes \_\_\_\_\_ No \_\_\_\_\_

3. If the answer is **yes** to any of the above, did the parents cooperate fully?

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

4. Has the student ever exhibited any type of behavior that would be detrimental to the class as a whole? (if yes, please explain)

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

	SUPERIOR	GOOD	AVERAGE	BELOW AVERAGE	UNKNOWN
INTELLECTUAL ALLERTNESS					
INDUSTRY					
ABILITY TO LEARN					
LEADERSHIP					
SENSE OF HUMOR					
RELIABILITY					
COOPERATIVENESS					
MATURITY					
SENSE OF RESPONSIBILITY TOWARD STUDY					
WORK HABITS (i.e. listening, following directions)					

*We are particularly interested in evidence about **character, relative maturity, independence, his/her value,** the things about which the student is enthusiastic, and any special talents he/she may possess. We would like to know both strong and weak points. If more space is needed, please attach a separate page to this form.*

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

You may fax the completed form to 703.998.5033,  
email it to [schoolinfo@bssva.org](mailto:schoolinfo@bssva.org),  
or mail it to: Blessed Sacrament School  
Admissions  
1417 W. Braddock Road  
Alexandria, VA 22302