



1417 W. Braddock Road
Alexandria, VA 22302
Phone: 703.998.4170
Fax: 703.998.5033
www.bssva.org

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 _____

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

1. What grade placement do you recommend for the coming school year? _____

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.*

Signature

Date

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