



## TK/KINDERGARTEN RECOMMENDATION FORM

Students entering TK or Kindergarten

A recommendation must be received for each student applying. Acceptance cannot be finalized without it. Please give this form to the teacher/director of previous school. If your child has not attended a school, give to a Sabbath/Sunday school teacher, daycare provider, pastor, or friend over the age of 21 who has known the family and applicant for at least 2 years.

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current School (if applicable): \_\_\_\_\_ Phone: \_\_\_\_\_

School Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\_\_\_\_\_ is applying for admission to Desert Adventist Academy's Transitional Kindergarten or Kindergarten. We would greatly appreciate your cooperation in giving an appraisal of this child's performance in preschool or in his/her natural environment. **The information requested will be kept in strict confidence.** Thank you for taking the time to complete this recommendation. We appreciate your observations. Please fax/mail or bring this form directly to Desert Adventist Academy, 74-200 Country Club Dr, #2, Palm Desert, CA 92260. Fax: 760-779-0179.

**A. Physical development** (please *circle* the applicable description):

Large motor skill development	good	average	needs more time
Small motor skill development	good	average	needs more time

**B. Emotional development** (please *circle* all descriptions that apply):

**1. Personality:**     *confident*     *outgoing*     *aggressive*     *quiet*     *pleasant*  
                               *assertive*     *nervous*     *distractible*     *tense*     *friendly*  
                               *tense*             *shy*             *cooperative*

**2. Behavior:**        *enthusiastic*     *sharing*             *receptive*        *responsive*     *hostile*  
                               *confident*             *respectful of authority*

**3. Moods:**            *contented*        *controlled*        *even tempered*     *angry*  
                               *withdrawn*        *sullen*             *happy*             *outgoing*

**C. Intellectual & academic development** (please *circle* all descriptions that apply):

*is curious*        *works independently*     *focuses on work*        *Follows directions*  
*is persistent*     *listens attentively*        *shares with others*  
*cooperates with others*             *exhibits problem solving ability*

**D. Communication** (please *circle* all descriptions that apply):

Uses rich vocabulary	responds to what others are saying	speaks clearly
English second language	limited use of English	hard to understand at times

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E. **Social Development** (please *circle* all descriptions that apply):

**General Behavior**

*follows rules*  
*exhibits independence*  
*shares with others*  
*demonstrates possessiveness*  
*enters into suggested activities*  
*is comfortable with adults*  
*is comfortable with peers*  
*has control with toilet habits*

**Play Behavior**

*interacts with peers positively*  
*plays alone*  
*takes the lead*  
*initiates activity*  
*enters into group play*  
*follows others*  
*shows bossiness*  
*quarrels*

F. **This student is** (please *circle* all descriptions that apply):

*self-motivated*      *well organized*      *regular in attendance*      *able to follow school program*

G. **The parents are** (please *circle* all descriptions that apply):

*cooperative with school*      *consistent with discipline*      *interested in education*  
*have realistic expectations for their child*

H. **Is this child receiving support services, which you know of?** (please *circle* descriptions that apply):

speech      hearing      counseling      other: \_\_\_\_\_

I. **Do you feel this student is academically ready for...**      Yes      No, please explain  
**Transitional kindergarten or kindergarten?**

J. **Do you feel this student is emotionally ready for...**      Yes      No, please explain  
**Transitional kindergarten or kindergarten?**

K. **What do you consider to be this student's greatest strengths?**

L. **In your judgment, what are the areas of greatest need in this student?**

M. **Please check one of the following:**

\_\_\_\_\_ I highly recommend      \_\_\_\_\_ I recommend with reservations  
\_\_\_\_\_ I recommend      \_\_\_\_\_ I do not recommend at this time

N. **Additional comments:**

Name: \_\_\_\_\_ Relation to student: \_\_\_\_\_

Phone: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_