



***Administrator Recommendation Form (2017-2018)***  
***For International Students***

**Administrator:** Your recommendation is highly valued by us as we consider this applicant for admissions to Grace Christian School. We at GCS ask that you complete this form carefully and return it directly to our Admissions Office at [admissions@gracechristiansanford.com](mailto:admissions@gracechristiansanford.com) or mail it to the attention of the Admission's Office P.O. Box 1408 Sanford, NC 27331.

Applicant's Name: \_\_\_\_\_  
(Last) (First) (Middle) (Current Grade Level)

1. How long have you known the applicant? \_\_\_\_\_

2. What words or phrases immediately come to mind when describing this student? \_\_\_\_\_

3. What observations concerning strengths, weaknesses, health or special needs are there in regards to this student? \_\_\_\_\_

4. How do you rate this applicant in the following areas?

Personal Qualities	Excellent	Above Average	Average	Below Average	No Opportunity to Observe
Leadership					
Punctuality					
Responsibility					
Initiative (self-starter)					
Reaction to criticism					
Reaction to setbacks					
Respect accorded by peers					
Respect accorded by adults					
Emotional stability					
Cooperativeness (team worker)					
Attitude toward authority					
Integrity and honesty					
Reaction to stress					

5. Please share with us any information you may have about the applicant that would help in our evaluation. This information could cover recent experiences or incidents in the applicant's life, or even a general personality appraisal.

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6. How do you support this applicant's request for admission to Grace Christian School?

Enthusiastically  Strongly  Fairly Strongly  Without Enthusiasm  Not Recommended

7. What disciplinary actions have been taken with this student? Brief description and dates.

Suspension(s): \_\_\_\_\_

Action Plan(s): \_\_\_\_\_

Detention(s): \_\_\_\_\_

Other: \_\_\_\_\_

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Administrator's Name: \_\_\_\_\_ School's Phone Number: \_\_\_\_\_

School's Name: \_\_\_\_\_

School's Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Administrator's Signature: \_\_\_\_\_