



Teacher Recommendation, Kindergarten

Name of Student _____ Preferred Name _____

Applying for School Year Beginning _____ School Presently Attending _____

The student named above is a candidate for admission to Oak Hill School, an independent, nonprofit, college-preparatory school for students from kindergarten through twelfth grade. A candid assessment of the applicant will be of great importance to the Admissions Committee in making final selections.

Please be assured that your responses will be kept in the strictest confidence and will be used for review and placement purposes. We appreciate your time and candor in filling out this report.

Emotional Development & Social Skills:	Always	Usually	Sometimes	Never
Initiates interaction with others	1	2	3	4
Responds to others' initiatives	1	2	3	4
Takes turns and shares	1	2	3	4
Participates in group time	1	2	3	4
Exhibits positive attitude toward teachers	1	2	3	4
Exhibits positive attitude toward peers	1	2	3	4
Peers exhibit positive attitude toward child	1	2	3	4
Adjusts to changes in routine	1	2	3	4
Has positive opinion of self	1	2	3	4
Responds to and accepts affection	1	2	3	4
Handles frustration with equanimity	1	2	3	4
Resolves problems without physical aggression	1	2	3	4

Learning Readiness Skills:

Has appropriate attention span during:

▪ Circle Time	1	2	3	4
▪ Story Time	1	2	3	4
▪ Free Play	1	2	3	4
Works well independently	1	2	3	4
Stays on task	1	2	3	4

Language Skills:

Has age appropriate vocabulary	1	2	3	4
Speaks clearly	1	2	3	4
Asks appropriate questions	1	2	3	4
Responds appropriately to questions	1	2	3	4
Conveys complete ideas	1	2	3	4

Mathematical Skills:	Always	Usually	Sometimes	Never
Recognizes numbers 1-10	1	2	3	4
Recognizes basic shapes	1	2	3	4

Motor Skills:

Displays age appropriate skill in:

▪ Cutting	1	2	3	4
▪ Drawing	1	2	3	4
▪ Running	1	2	3	4

Aesthetic Development:

Actively participates in:

▪ Art	1	2	3	4
▪ Music	1	2	3	4
▪ Dramatic Play	1	2	3	4

Additional Information:

How long have you known the applicant? _____

How long has this student been enrolled in your school? _____

Does he/she attend school on a regular basis? yes no

Please comment on special strengths and/or areas of concern:

If it would be advisable for someone on the Admissions Committee to call you for further information, please check here.

Your Name _____ Position _____

Signature _____ Date _____

School Name _____

Telephone number () - Email Address:

Thank you for your thorough completion and prompt return of this report. Please return to:

Oak Hill School

Admissions Office

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