



PRINCIPAL / COUNSELOR RECOMMENDATION

Applicant's Name: _____

Present School: _____

To the Principal or Counselor: The student named above has applied to Christian Brothers High School and requests that you complete this recommendation form on his/her behalf. The applicant's parents/guardians have signed a waiver to their right of access to this information: Your remarks will remain confidential and will not become part of the student's permanent record. Please complete and return this recommendation form to Christian Brothers High School by **Friday, January 20, 2017**. Thank you in advance, for your time and thoughtful response.

Please circle the number that best describes this student in each of the categories listed below.

	Poor	Satisfactory	Excellent	No opportunity to observe
Study Habits	1	2	3	
Motivation and Drive	1	2	3	
Personal Conduct	1	2	3	
Concern for Others	1	2	3	

Should the Admissions Committee be aware of any factors that have had an impact on this applicant's academic or social progress to date? (e.g. health problems, behavioral concerns, family issues, learning disabilities, or learning differences)

☐ Yes ☐ No (If yes, please explain)

Has this applicant been enrolled in any special programs? ☐ Yes ☐ No (If yes, please explain)

Do you think the applicant's test scores accurately reflect achievement and ability? ☐ Yes ☐ No
(If no, please explain)

Would you recommend this student as a candidate for admission to Christian Brothers High School?

☐ Definitely ☐ Maybe ☐ Probably Not

Please explain (feel free to provide more detail on the reserve side of this form)

Signature

Printed Name & Title

Date

This form may be scanned and sent via email to: admissions@cbhs-sacramento.org, faxed to 916-733-3657, or mailed to Christian Brothers High School, Admissions Office, 4315 Martin Luther King Blvd., Sacramento, CA 95820
Feel free to contact us if you have any questions: 916-733-3690