



## MATHEMATICS INSTRUCTOR RECOMMENDATION

(Please submit this form to Mathematics Instructor for completion)

Applicant's Name: \_\_\_\_\_

Present School: \_\_\_\_\_

**To the Instructor:** 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 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 circle the number that best describes this student in each of the categories listed below. Forms must be received by the Admissions Office at Christian Brothers High School no later than **Friday, January 18, 2019**. 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	
Attentiveness in classroom	1	2	3	
Motivation and Drive	1	2	3	
Personal Conduct	1	2	3	
Concern for Others	1	2	3	

**Present Course:** (please check one)

- |  |   |
|--|---|
| <input type="checkbox"/> Pre-Algebra   | <input type="checkbox"/> Geometry (full-year high school level course)          |
| <input type="checkbox"/> Math 8/Math 1   | <input type="checkbox"/> Integrated Math 1 (full-year high school level course) |
| <input type="checkbox"/> Algebra 1 (partial study of high school level course) | <input type="checkbox"/> Integrated Math 2 (full-year high school level course) |
| <input type="checkbox"/> Algebra 1 (full-year high school level course)        | <input type="checkbox"/> Other _____  |

Textbook Used (Title & Publisher): \_\_\_\_\_ Student's Current Grade in Course: \_\_\_\_\_

Please describe the student's performance and ability in mathematics:

Would you want this student in your class again? ☐ Definitely ☐ Maybe ☐ Probably Not

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

**Course level recommendation for freshman year:** (please check one)

- |   |   |
|---|---|
| <input type="checkbox"/> Algebra 1A (1 <sup>st</sup> semester of Algebra taught over a full year) | <input type="checkbox"/> Honors Geometry (full-year course)             |
| <input type="checkbox"/> Algebra 1 (full-year course)   | <input type="checkbox"/> Algebra 2 (full-year course)                   |
| <input type="checkbox"/> Accelerated Algebra 1 (full-year course)                                 | <input type="checkbox"/> Honors Algebra 2 (high level full year course) |
| <input type="checkbox"/> Accelerated Math 2 (Integrated Math 2)                                   | <input type="checkbox"/> Other (Please explain): _____                  |

\_\_\_\_\_  
Instructor's Signature

\_\_\_\_\_  
Instructor's Printed Name

\_\_\_\_\_  
Date

Forms may be scanned and sent via email to: [admissions@cbhs-sacramento.org](mailto: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  
Please contact us if you have any questions: 916-733-3690

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