



Academic Excellence • Religious Commitment  
Character Development

## Early Childhood Teacher Recommendation Form

**Parents:** Please complete the top portion and submit this document, along with the Release of Student Records Form, to your child’s current school.

**Name of Child** \_\_\_\_\_

**Applying for Grade** \_\_\_\_\_

**Current School** \_\_\_\_\_

**Current School:** This form should be completed by this student’s current teacher. Thank you for taking the time to complete this recommendation. It provides us with a way of getting to know the child and is reviewed with the awareness that young children are constantly changing and developing. Your input is a valuable component of our admissions process and is greatly appreciated. (This recommendation will be used for BMA admissions purposes only. All responses will remain strictly confidential. Please do not share this information with the student or parents.)

**Student’s attendance is:**     REGULAR     NOT REGULAR

### SOCIAL/EMOTIONAL DEVELOPMENT

	Area of Strength	Age Appropriate	Progressing Toward Age Appropriate	Possible Area of Concern
Is comfortable with adults				
Is comfortable with peers				
Initiates group play				
Works respectfully with peers				
Interacts respectfully with teachers				
Shares well without prompting				
Ability to transition				
Is able to wait a turn				
Tolerates frustration				
Capacity to lead				
Capacity to follow				
Accepts limits				
Self-motivation				
Uses materials appropriately				
Cooperation in classroom				

<b>COGNITIVE DEVELOPMENT</b>				
	Area of Strength	Age Appropriate	Progressing Toward Age Appropriate	Possible Area of Concern
Ability to listen/follow directions in a group				
Ability to listen/follow directions individually				
Follows multiple step directions				
Contributes to group discussions				
Able to work independently				
Demonstrates ability to problem solve				
Demonstrates curiosity/interest in learning				
Grasps new concepts				
Willingness to try new activities and challenges				
Attention span in a self-chosen activity				
Attention span in an assigned activity				
Concentration				
Follow-through				

<b>SPEECH AND LANGUAGE DEVELOPMENT</b>				
	Area of Strength	Age Appropriate	Progressing Toward Age Appropriate	Possible Area of Concern
Understands stories read aloud				
Memory for events and information				
Tells story events in sequence				
Expresses ideas orally				
Clarity of speech				
Fluency of expression				
Use of vocabulary				

## PHYSICAL DEVELOPMENT

	Area of Strength	Age Appropriate	Progressing Toward Age Appropriate	Possible Area of Concern
Fine motor control and coordination				
Gross motor control and coordination				
Awareness of personal space				
Easily tolerates a variety of sensory stimuli (ex. loud sounds, textures, touch)				
Participates in physical activities				
Pencil grasp				
Left/right directionality				

Please add any additional information that you feel would be important to our overall assessment of the child.

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**FOR STUDENTS APPLYING TO 1<sup>ST</sup> GRADE ONLY COMPLETE BELOW: (All others, proceed to Page 4)**

## READING READINESS

	Area of Strength	Age Appropriate	Progressing Toward Age Appropriate	Possible Area of Concern
Recognizes upper and lower case letters				
Writes own name				
Knows sound relationships				
Left/right directionality				

COMMENTS:

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## MATH READINESS

	Area of Strength	Age Appropriate	Progressing Toward Age Appropriate	Possible Area of Concern
Recognizes numbers				
Recognizes colors/shapes				
Follows patterns				
One-to-one counting				

COMMENTS:

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**Please check the boxes next to the words that best describe this student:**

- Well-balanced     Positive and enthusiastic     Apathetic     Angers easily  
 Gentle     Kind     Tends to be overly emotional

**What are the student's strengths?**

Academic \_\_\_\_\_

Character \_\_\_\_\_

**What are the student's weaknesses?**

Academic \_\_\_\_\_

Character \_\_\_\_\_

**Has this student ever been recommended for academic or psychological/psychiatric testing?**

- Yes     No    Please Explain:

\_\_\_\_\_  
\_\_\_\_\_

**Have the parents been supportive of the school's efforts and policies?**     Yes     No

**Please include any additional information that you feel would be important to our overall assessment of the child.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I recommend this student for admission with:**

- Great enthusiasm  
 With confidence  
 With reservation  
 I do not recommend

**Thank you for taking the time to complete this evaluation. Your insight will be a helpful tool in assessing this student's admission application.**

Teacher's Name and Position: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

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

**PLEASE MAIL OR FAX TO:**

ADMISSIONS OFFICE  
BRAUSER MAIMONIDES ACADEMY  
5300 S.W. 40<sup>TH</sup> AVENUE  
FORT LAUDERDALE, FL 33314  
PHONE: 954-989-6886  
FAX: 954-989-4548

A COPY OF THIS SHALL BE VALID AS THE ORIGINAL