



FULTON SCIENCE ACADEMY
— Private School —

**Pre-K - 1st Grade Applicants
Teacher Recommendation Form**

Fulton Science Academy Private School
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Applicant Name: _____ Grade Apply: _____ School Year Apply: 20_____

To the Classroom Teacher:

Thank you for taking the time to complete this form. It provides one way to help determine the applicant's readiness for the early elementary program at Fulton Science Academy, and it is reviewed with full awareness that young children are constantly changing and developing. Rest assured that your answers will be kept in the strictest confidence.

The Admission Committee

Section 1: Social/Emotional Development

	Area of Strength	Age Appropriate	Progressing Toward Age Appropriate	Possible Area of Concern	Comments
Separates easily from parents/guardians					
Is comfortable with adults					
Finds way to enter group play					
Initiates play activities					
Cooperates in play					
Engages in imaginative play					
Shares well without prompting					
Plays alone comfortably					
Participates willingly in group clean-up					
Respects the rights and property of others					
Shows concern towards peers					
Stands up for self					
Uses words to resolve conflicts					
Demonstrates flexibility in problem solving					
Has an appropriate sense of humor					
Accepts responsibility for behavior					

Section 2: Cognitive Development

	Area of Strength	Age Appropriate	Progressing Toward Age Appropriate	Possible Area of Concern	Comments
Attends to an adult-led activity (ex: Morning Meeting) for the expected length of time					
Understands the give and take of group discussion					
Contributes to group discussions					
Follows 2-3 step directions					
Works cooperatively					
Is able to work independently					
Demonstrates persistence in learning					
Demonstrates the ability to focus on one task					
Demonstrates curiosity					
Willingly tries new activities and challenges					
Demonstrates problem-solving skills					
Recalls and utilizes prior information					
Easily grasps new concepts					
Responds positively to teacher re-direction and limit-setting					
Adapts to change in routine					
Moves easily from one activity to another					

For Applicants to Kindergarten and Grade 1 ONLY:

Please comment on the candidate's **beginning reading-readiness skills** (recognizes letters, writes own name, knows sound/symbol relationships, etc.).

Please comment on the candidate's **beginning math-readiness skills** (recognizes numbers, identifies colors and shapes, follows patterns, etc.)

Section 3: Physical Development

	Area of Strength	Age Appropriate	Progressing Toward Age Appropriate	Possible Area of Concern	Comments
Hand-eye coordination and dexterity					
Pencil grasp					
Self-help skills (ex: hand washing, bathroom skills, eating snacks/lunch, etc.)					
Gross motor skills (ex: running, climbing)					
Balance and coordination					

Section 4: Speech and Language Development

	Area of Strength	Age Appropriate	Progressing Toward Age Appropriate	Possible Area of Concern	Comments
Understands most of what is said at school					
Speaks in detailed sentences					
Tells stories that stick to the topic					
Speaks clearly in most contexts					

Section 5: Parent and Family Information

Has/have the parent/guardian(s) of this child been:

	Consistently	Usually	Sometimes	Rarely	Comments
Supportive of the child's school experience					
Supportive of your school's programs/routines					
Supportive of you as a teacher					
Responsive to suggestions/guidance					
Realistic in setting educational goals					

Section 6: Closing

1. How long have you known the applicant? _____

2. Is this applicant generally on time for school? **Yes** or **No**
 - a. Comments: _____

3. Does the applicant generally come to school every day? **Yes** or **No**
 - a. Comments: _____

4. What three words would you use to describe the applicant? _____

Please comment on the candidate's ability to meet the expectations of your program. Have you adjusted your program to accommodate the needs or abilities of this child?

Please feel free to share any other information that you think would be helpful.

Your Name: _____

Date _____

Your Email: _____

School Name: _____