

Permission for School to Release Student Records

Name of Applicant _____ Grade for which applying _____

The form below is to be completed by the Principal, Director, or teacher of your child's most recent school. The Committee on Admission cannot act until this confidential recommendation has been received. This form will be used only for the admission process and will not become part of the student's permanent record. The school will mail this form directly to one or more of the following schools listed below. A parent may not "hand carry" this form to the receiving school(s).

I/We authorize the release of my/our child's academic record, IQ, and other test data, recommendation forms, disciplinary records, and any other information maintained by the school. I/We release every person and institution from any and all liability resulting from or pertaining to the furnishing of records, documents, and other information provided to the receiving school(s) for that purpose.

This permission is a continuing release. At a later time, if my child is accepted by one of the receiving schools, I/we authorize the release to that school of any additional, updated, or completed records from my child's current school.

Signatures of both
Date _____ Parents/Guardians _____

School should retain this form as record of Parent Permission.

Please send this completed recommendation and records to the Admission Office of one or more of the following schools:

- ___ Gulf Stream School, 3600 Gulf Stream Road, Gulf Stream, FL33483
- ___ North Broward Preparatory Schools, 7600 Lyons Road, Coconut Creek, FL 33073
- ___ Pine Crest School, Boca Raton, 2700 St. Andrews Boulevard, Boca Raton, FL 33434
(PK4 to Grade One)
- ___ Pine Crest School, Fort Lauderdale, 1501 NE 62 Street, Fort Lauderdale, FL 33334
(PK4 to Grade One)
- ___ Saint Andrew's School, 3900 Jog Road, Boca Raton, FL 33434
- ___ Saint Mark's Episcopal School, 1750 East Oakland Park Boulevard, Fort Lauderdale, FL 33334
- ___ Saint Paul Lutheran School, 701 West Palmetto Park Road, Boca Raton, FL 33486
- ___ The Day School of Coral Springs, 9001 Westview Drive, Coral Springs, FL 33067
- ___ University School of Nova Southeastern University, 7500 SW 36 Street, Fort Lauderdale, FL 33414
(PK4-Grade One)

**School Recommendation Form
For Admission to PK-3 through Grade 1**

Name of Student _____

Grade for which applying _____

This student is applying for admission to one or more of the schools listed on the attached **Permission for School to Release Student Records** for the **2007-2008** scholastic year. This recommendation form provides a way of getting to know the child and is received with the awareness that young children are constantly changing and developing. Your candid evaluation of the applicant will be of invaluable assistance to the Admission Committee. **Be assured that your comments will be held in strict confidence.** Thank you for your assistance.

If you wish to discuss this student personally also, please check here.

Social / Emotional Development	Exceeds Age	Age Appropriate	Needs Development	Comments
Works respectfully with peers				
Is able to wait for a turn				
Carries out responsibilities				
Interacts cooperatively with others				
Interacts respectfully with teachers				
Transitions easily				
General behavior is predictable and age appropriate				
Exhibits self-control				

Academic Skill Development	Usually	Sometimes	Seldom	Comments
Listens attentively and follows directions and rules				
Demonstrates ability to focus on task and to problem solve				
Completes tasks in allotted time				
Works carefully and neatly				
Works well independently				

Physical Development	Exceeds Age	Age Appropriate	Needs Development	Comments
Is able to relax				
Small muscle control and coordination				
Large muscle control and coordination				
Speech development (articulation)				
Left/right directionality				

(See Reverse)

Please describe the child's development of:

Beginning reading skills _____

Beginning math skills _____

Talks excessively on a topic/uses words repetitively Yes _____ No _____

Displays behaviors similar to a much younger child Yes _____ No _____

Parent cooperation and involvement with the school: _____

If your school is private, are financial responsibilities for school bills met on time? _____

How long have you known the child? _____

Does the student have any significant limitations that affect school performance?

Please explain: _____

Is there anything significant about the home life which will help us understand this child?

We welcome any other information about the student or family that you think would be helpful.

I recommend this student for admission

with great enthusiasm

with confidence

with reservation

I do not recommend

(Mr., Mrs., Ms., Dr.) _____

Printed Name

School

Position

School address

City/State

Zip code

School phone number

Signature

Date

Please return this form to the appropriate school(s) marked on the parent permission form.