

# Confidential Recommendation Form Valley Lutheran High School

Applicant's full name: \_\_\_\_\_

**To the educational, pastoral, or community person writing this recommendation:** So that the admissions staff at Valley Lutheran High School may gather as much information as possible to assess this student fairly, we ask you to complete this form objectively. Thank you for your help and cooperation.

Please rate the student in the categories listed using the following guide:

**4=Outstanding   3=Excellent   2=Average   1= Below Average   X= Not Observed**

\_\_\_\_\_ Academic Performance  
\_\_\_\_\_ Regular Attendance  
\_\_\_\_\_ Participation/Dependability  
\_\_\_\_\_ Intellectual Ability  
\_\_\_\_\_ Initiative & Effort  
\_\_\_\_\_ Problem Solving Skills  
\_\_\_\_\_ Comprehension Skills  
\_\_\_\_\_ Behavior/Self-Control  
\_\_\_\_\_ Ability to Work with Others  
\_\_\_\_\_ Extracurricular Achievement

\_\_\_\_\_ Demonstration of Leadership Skills  
\_\_\_\_\_ Self-Discipline/Responsibility  
\_\_\_\_\_ Quality of Verbal Expression  
\_\_\_\_\_ Ability to Complete Independent Work  
\_\_\_\_\_ Timeliness  
\_\_\_\_\_ Work Habits & Time Management  
\_\_\_\_\_ Creativity/Resourcefulness  
\_\_\_\_\_ Spiritual Interest  
\_\_\_\_\_ Biblical Understanding  
\_\_\_\_\_ Personal Qualities & Character

In what capacity have you known the applicant, and for how long? \_\_\_\_\_

Please describe this student's skills, abilities, experiences, and any additional qualities you have observed that would be strong points for our academic & spiritual community. \_\_\_\_\_

What are the first words that come to mind when you think of this applicant? \_\_\_\_\_

How strongly or with what reservations would you recommend this student to Valley Lutheran High School? \_\_\_\_\_

**Please return to:   Valley Lutheran High School  
Attn: Admissions Office  
5199 N. 7th Ave.  
Phoenix, AZ 85013**

This recommendation may be given to the applicant, it may be placed in a sealed envelope by the recommender to be sent with other requested documentation, or it may be sent directly to VLHS.

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Phone/Email contact: \_\_\_\_\_ Date: \_\_\_\_\_

Position/Subject: \_\_\_\_\_ Organization/Location: \_\_\_\_\_