



ACADEMIA LATINA 2009

Student Recommendation Form CONFIDENTIAL

TO BE COMPLETED BY STUDENT:

Name of student: _____

School: _____ Current grade student is in _____

TO BE COMPLETED BY REFERENCE:

We value your professional opinion in our assessment of this student. Note: Please return this recommendation to the student in a sealed envelope with your signature across the sealed flap. Please complete it in a timely manner, as the student's application is not complete without it. Thank you for taking time to fill out this form.

Date: _____ Name of reference: _____

Address: _____

Home phone: _____ Work Phone: _____ Email _____

1. How long have you know this student? _____

2. In what capacity have you known this student? _____

____ Teacher ____ Community Leader ____ Other, please specify: _____

3. **Descriptors:** **Superior** **Good** **Adequate** **Weak** **N/A**

Ability to work with others					
Leadership					
Seriousness of purpose					
Initiative					
Persistence					
Creativity					
Academic Performance					
Bilingual Skills					
Communication Skills					

4. To be considered for Academia Latina, students must show a personal commitment to attend and participate. How has this student shown interest?

5. Students must also demonstrate at least one of the following. Please indicate which of these apply to the applicant:

Proven leadership ability

A special talent

Ability in the visual and performing arts

Creative or productive thinking ability

Give examples illustrating the categories checked above.

6. How can this student benefit from **ACADEMIA LATINA**?

7. Are there any behavioral characteristics (e.g., self discipline, respect for rules and people in authority) that we should know about that would help us better serve this student?

8. Do you feel it would be beneficial for us to contact you by phone? Yes No