



HOLY CROSS HIGH SCHOOL

587 Oronoke Road
Waterbury, CT 06708-3999

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FAX (203) 757-3423
www.HolyCrossHS-ct.com

Recommendation for Freshman Applicant

- Confidential -

(Please type or print clearly)

Instructions

To the Student: Please complete all sections on Page 1 of this form and the top portion of Page 2.

To the School Official: Once the student listed below has completed the required fields, we ask that you complete the back of this form. We appreciate your candid assessment of the student's academic and personal credentials. Subsequent to completing this form, we ask that you return it to Holy Cross along with copies of the student's records (including academic records, attendance records, health and any available testing information) in the return envelope provided.

Student's Name _____
First Middle Last

Address _____ City _____ State _____ Zip Code _____

Home Phone _____ Date of Birth _____/_____/_____
Month Day Year

School Currently Attending _____ City, State _____

Which school subject do you like most? _____

Which school subject do you like least? _____

In which school subject have you performed best? _____
(not necessarily judged by high grades)

Please write a brief statement in response to the following questions: Why are you interested in attending Holy Cross High School? And what do you think you can contribute to the Holy Cross community?

Signature of Student _____ Date _____/_____/_____
Month Day Year

Student's Name _____
First Middle Last

School Currently Attending _____ City, State _____

FOR OFFICE USE ONLY

To be completed by School Official

Name of Evaluator _____ Title _____

Phone # _____ How long have you known this student? _____

Signature of Evaluator _____ Date _____/_____/_____
Month Day Year

1. Does this student have any problems known to you that could affect his/her placement in a college preparatory program (this would include emotional problems, learning disabilities, etc.)? Yes No

If Yes, please explain: _____

2. The student currently has: 504 Plan IEP (Please attach applicable documentation.)

3. What is your estimate of this student based on the characteristics listed below? (please check)

	Excellent	Good	Average	Below Average	No Basis for Judgment
Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: (please feel free to offer additional information related to the student's qualifications):

Summary Evaluation:	Highly Recommend	Recommend	Recommend with Reservation	Do Not Recommend
Overall Recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>