



THE WEBB SCHOOL

BELL BUCKLE

The Character of Home

Office of Admissions • Post Office Box 488 • Bell Buckle • Tennessee 37020-0488 • 931-389-6003 • Fax: 931-389-6657

MATH TEACHER'S CONFIDENTIAL RECOMMENDATION

For Student:

_____ has applied for admission to The Webb School as a day boarding student in the _____ grade. Please give your candid appraisal of the student. Use extra paper if you need more space.

For Teacher:

How long have you known the applicant? _____

In what course(s) have you taught him or her? _____

What grade(s) did the student earn in your course(s)? _____

Briefly describe your course. Is it an honors or accelerated course? It is especially helpful to know what texts are used and if the students are grouped by ability.

What math course would be the most appropriate placement for this student next year? _____

Student's Mathematical Background: The courses below suggest a sequence typical of the mathematics curriculum in many U.S. secondary schools. If your school does not follow this sequence, please attach your curriculum. Please check those courses or list others which the student will have completed by the end of the current school year.

- | | |
|---|---|
| <input type="checkbox"/> Basic First-Year Algebra (excludes extensive study of rational expressions, irrational numbers, and quadratic equations) | <input type="checkbox"/> Calculus (an introduction) |
| <input type="checkbox"/> First-Year Algebra (a thorough course includes quadratics) | <input type="checkbox"/> Calculus (Advanced Placement AB) |
| <input type="checkbox"/> Geometry | <input type="checkbox"/> Calculus (Advanced Placement BC) |
| <input type="checkbox"/> Second-Year Algebra (not including trigonometry) | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Second-Year Algebra (includes numerical trigonometry through the laws of sine and cosine) | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Pre-Calculus (includes analytical trigonometry) | |

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught. If you have no fair basis for judgment, do not hesitate to say so.

	One of the top few I have ever encountered	Excellent (top 10% this year)	Good (above average)	Average	Below Average	No basis for judgment
Knowledge of Basic Skills						
Accuracy in the Use of Basic Skills						
Problem Solving Ability						
Reasoning Ability						
Understanding of and Appreciation for the Underlying Ideas and Concepts						
Effort						
Overall Performance						
Willingness to Accept the Challenge of the More Difficult Problems and Exercises						
Command of Mathematics When Compared to Other Students Whom You Have Taught						

What are the first three words that come to mind to describe this student?

1. _____ 2. _____ 3. _____

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught. If you have no fair basis for judgment, do not hesitate to say so.

	One of the top few I have ever encountered	Excellent (top 10% this year)	Good (above average)	Average	Below Average	No basis for judgment
Academic Potential						
Academic Achievement						
Intellectual Curiosity						
Effort/Determination						
Ability to Work Independently						
Ability to Work in a Group						
Organization						
Creativity						
Willingness to Take Intellectual Risks						
Concern for Others						
Honesty/Integrity						
Self-esteem						
Maturity (relative to age)						
Responsibility						
Respect Accorded by Faculty						
Respect Accorded by Peers						
Emotional Stability						
Parent Cooperation						
Overall Evaluation as a Person						
Overall Evaluation as a Student						

If the student is relatively weak or strong in any areas listed above, please elaborate.

Please comment on this student's character, citizenship, and contributions to your community.

Please add any additional information that will give us a more complete picture of the student.

Thank you for taking your valuable time to complete this evaluation. Your reflections are an important part of the student's application.

Name: _____ Position: _____

School Name: _____

School Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ E-mail: _____

Signature: _____ Date: _____

Optional: I would like to receive information about The Webb School. yes no