



CONFIDENTIAL

PHOENIX FRIENDS SCHOOL TRANSCRIPT RELEASE AND REPORT FORM

PARENT AUTHORIZATION

As part of the undersigned child's application for admission, we require recommendations. The undersigned acknowledges that these recommendations are confidential communications. The undersigned waives all rights to access recommendations and acknowledges that the school is relying on this waiver and would not consider the applicant without.

Name of Applicant

Current Grade

Parent/Guardian Authorization Signature for release of records

NOTE TO THE HEAD OF SCHOOL OR PRINCIPAL

The student named above is applying for admission to Phoenix Friends School. A full and candid report from the student's present school is necessary for consideration by an admissions committee. Please complete this form, keep the original, and return a photocopy to Phoenix Friends School by email (jordan@phoenixfriendsschool.org) or by direct mail (1875 N. Central Ave., Phoenix, AZ 85004). Your comments will be held in the strictest confidence.

PLEASE ATTACH THE OFFICIAL TRANSCRIPT FOR THE STUDENT AS PER THE ABOVE AUTHORIZATION.

If you do not feel that you are the appropriate person to fill out the recommendation form, please pass it on to the division head, guidance counselor, or student's advisor. Similar forms will be sent to the student's teacher(s).

Please circle the number that best applies in each category

| ACADEMIC ASSESSMENT | Weak | Fair | Good | Excellent | Exceptional |
|----------------------------|-------------|-------------|-------------|------------------|--------------------|
| Motivation | 1 | 2 | 3 | 4 | 5 |
| Self-discipline | 1 | 2 | 3 | 4 | 5 |
| Growth potential | 1 | 2 | 3 | 4 | 5 |
| Achievement | 1 | 2 | 3 | 4 | 5 |

| SOCIAL/EMOTIONAL DEVELOPMENT | Weak | Fair | Good | Excellent | Exceptional |
|-------------------------------------|-------------|-------------|-------------|------------------|--------------------|
| Leadership | 1 | 2 | 3 | 4 | 5 |
| Self-confidence/Sense of humor | 1 | 2 | 3 | 4 | 5 |
| Concern for others | 1 | 2 | 3 | 4 | 5 |
| Emotional maturity | 1 | 2 | 3 | 4 | 5 |
| Personal maturity | 1 | 2 | 3 | 4 | 5 |
| Respect shown to faculty | 1 | 2 | 3 | 4 | 5 |
| Ability to work with others | 1 | 2 | 3 | 4 | 5 |
| Contribution to school community | 1 | 2 | 3 | 4 | 5 |

PLEASE COMMENT:

1. In what areas has the student shown any unusual ability or aptitude?

2. Has the applicant demonstrated any adverse academic or social behavior? If yes, please explain.

3. Has the candidate's home environment been a positive force in his or her development?

4. Is the parents' perception of their child compatible with the school's understanding of the child?

5. If the student were left in your group without supervision, he or she would most likely:

- assume responsibility to direct or organize the group
- continue to work on his or her own
- wait for further instruction
- lose interest or possibly become disruptive
- other (please explain)

6. To your knowledge, does the student have an IEP/Learning Plan/Behavioral Plan? If yes, please provide details.

7. Summary Appraisal:

Please check here if you wish to discuss this report further by telephone: _____ Best time to call

Name (Please print) Position

School Telephone

Signature Date