



MATH TEACHER RECOMMENDATION

The Academy @ Metropolitan School of the Arts
5775 Barclay Drive, Suite 4 • Alexandria, VA 22315
www.metropolitanarts.org • academy@metropolitanarts.org • 703.339.0444

CONFIDENTIAL

Name of Applicant _____
Last First Middle

Preferred Name _____ Date of Birth _____ Current Grade in School _____

To the Parent/Guardian:

Please read and sign the statement below. I acknowledge that I waive my right to read the confidential teacher recommendation and the school report for the student listed above. Please have grade reports, attendance records, standardized test scores, and teacher reports/comments forwarded to Metropolitan School of the Arts electronically at academy@metropolitanarts.org or by providing recommenders with stamped envelopes addressed to:

Metropolitan School of the Arts
Attn: Academy Admissions
5775 Barclay Drive, Suite 4
Alexandria, VA 22315

Name of parent or guardian please print

Signature of parent or guardian

Date

To the Teacher:

This form is part of a standard application being used by many independent schools throughout the U.S., Canada and abroad. This recommendation will remain confidential. Be sure the parent/guardian has signed the form in the space above. Feel free to use additional sheets, if necessary. The student should provide you with a stamped, addressed return envelope with this form. You are welcome to attach a narrative statement, but if you do so, we request that you complete the checkboxes on this form as well. Please do not complete this form prior to November of the current school year to ensure enough time has passed to give a fair evaluation of the student's current progress. Please return a signed and completed copy of this form to Metropolitan School of the Arts in the envelope provided or electronically to academy@metropolitanarts.org.

Teacher's Name (please print)

School Name

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How well do you know the student academically? _____

As a person? _____

In what years did you teach the student? _____

How large is the class? _____

What course(s)? _____

Is this course part of a tracking system or designated as an honors or accelerated course? ☐ Yes ☐ No

Briefly describe your course. It is especially helpful to know what texts are used and if the students are grouped by ability.

Next year, what math course would be the most appropriate placement for the student? _____

Is this course part of a tracking system or designated as an honors or accelerated course? ☐ Yes ☐ No

Student's Mathematical Background: The courses listed 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.

- ☐ Basic First Year Algebra (does not include extensive study of rational expressions, irrational numbers, and quadratic equations)
- ☐ First Year Algebra (a thorough course, which included quadratics)
- ☐ Geometry
- ☐ Second Year Algebra (not including trigonometry)
- ☐ Second Year Algebra (includes numerical trigonometry through the laws of sine and cosine)
- ☐ Pre-Calculus (including analytical trigonometry)
- ☐ Calculus (an introduction)
- ☐ Calculus (Advanced Placement AB)
- ☐ Calculus (Advanced Placement BC)
- ☐ _____

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.

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

1. _____

2. _____

3. _____

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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 I have ever encountered	Excellent (top 10%)	Good (above average)	Average	Below average	No basis for judgment
Knowledge of the 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						
Academic Potential						
Academic Achievement						
Intellectual Curiosity						
Effort/Determination						
Ability to Work Independently						
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						
Overall Evaluation as a Person						
Overall Evaluation as a Student						

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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 time to complete this evaluation. Your reflections are an important part of the student’s application.

Signature _____ Date _____ Mailing address _____

Phone Number _____ E-mail address _____

Please email recommendation to academy@metropolitanarts.org or mail to:
Metropolitan School of the Arts • Attn: Academy Admissions
5775 Barclay Drive, Suite 4 • Alexandria, VA 22315

Metropolitan School of the Arts admits students of any race, color, religion, sexual orientation, national or ethnic origin.