



Lake Catholic High School Confidential Recommendation for Admission

Recommendation: To be completed by a teacher, guidance counselor, or school administrator.

Name of Applicant _____

How long have you known this applicant? _____

The student above is seeking admission to Lake Catholic High School. We would appreciate your candid response regarding the student's intellectual promise and capacity for success. This recommendation will not become part of the student's permanent file. Thank you for your time and effort in completing this form.

Excellent
Good
Average
Poor

	Excellent	Good	Average	Poor
Willingness to Serve Others				
Academic Achievement				
Academic Potential				
Consistency of Performance				
Quality of Daily Preparation				
Work Ethic				
Class Participation/Attentiveness				
Self-direction				
Leadership Ability				
Relationship with Peers				
Relationship with Adults				
Respect for Others				
Integrity and Honesty				
Social and Emotional Maturity				
Exercises Self Control				

Additional comments
(optional): _____

School Official's Name _____

Title _____

School _____

Signature _____

Date _____

Return this form to: Lake Catholic High School
Admissions Office
6733 Reynolds Road
Mentor, Ohio 44060