



# Principal's Recommendation

## To be completed by the parent(s):

Student's Name: \_\_\_\_\_ Applying to Grade: \_\_\_\_\_ Start Date: \_\_\_\_\_

I hereby authorize the release of the following information to Quinte Christian High School to assist in admission and registration as required under the Freedom of Information and Personal Privacy Act.

Parent/Guardian #1: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian #2: \_\_\_\_\_ Date: \_\_\_\_\_

## To be completed by principal or elementary school teacher at the school in which the student is currently enrolled:

Student's OEN Number	
Name of School	
School Address	
School's Phone Number	
Principal's Name	
Teacher's Name	
In what capacity and for how long have you known the applicant	

### CONFIDENTIAL PRINCIPAL/TEACHER RECOMMENDATION

Qualities	1	2	3	4	5
<b>Academic Potential</b>	Exceptionally promising	Generally strong	Average, satisfactory work	Below average marginal ability	Very weak
<b>Personal Qualities</b>	Outstanding leads and participates	Generally strong	Average	Below average, Immature	Very immature for age
<b>Emotional Stability</b>	Exceptionally stable	Well balanced	Generally well balanced	Excitable unresponsive distractible	Hyper-emotional apathetic
<b>Summary</b>	Outstanding	Above average	Average	Below average	Very weak

Please comment on the applicant's attitude toward school.

Very Positive

Positive

Non-Committal

Negative

To your knowledge, has the applicant had any history of involvement with drugs, alcohol, or juvenile delinquency?

Yes

No

If yes, please explain

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Has the applicant ever been suspended or expelled?

Yes

No

If yes, please explain

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To your knowledge, has the applicant had any history of conduct or behavior problems?

Yes

No

If yes, please explain

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Does the applicant have any history of a learning disability?

Yes

No

If yes, please explain

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Has the applicant required any special help to meet academic requirements?

Yes

No

If yes, please explain

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Does the applicant have an Individual Education Plan (IEP)?

Yes

No

If yes, please attach a copy

Please add any additional comments, if needed.

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Please include a high school transcript if the applicant is presently enrolled in a high school.

Teacher's Signature \_\_\_\_\_

Date \_\_\_\_\_

Principal's Signature \_\_\_\_\_

Date \_\_\_\_\_

**Please return the recommendation to:**

Quinte Christian High School  
138 Wallbridge Loyalist Road  
Belleville ON K8N 4Z2

Tel: 613-968-7870  
Fax: 613-968-7970  
E-Mail: admin@qchs.ca