

Teacher Recommendation

Providence Public Schools
Office of Advanced Academics
797 Westminster Street
Providence, RI 02903

(Parents: Please ask your child's teacher to complete this form and return it to you so that you may send it forward along with the other application documents.)

Dear Teacher:

Please print the name of the student you are recommending, the grade, and school:

Student Name: _____ **Grade:** _____

School: _____

Teacher Name: _____ **Subject:** _____

The teacher recommendation is a quintessential component of the selection process for students to be considered as a part of the 2023-2024 Advanced Academic Program. Please complete the Teacher Rating Scale and write a précis (brief narrative) about the student. The précis should include the student's strengths not necessarily covered in the Teacher Rating Scale.

Teacher Member Rating Scale

| Student Name _____ | | | | | |
|--|------|---------|------|-----------|-------------|
| Characteristic | Poor | Average | Good | Very Good | Outstanding |
| Concentration | | | | | |
| Vocabulary | | | | | |
| Fluent Use of Language | | | | | |
| Computation | | | | | |
| Perseverance | | | | | |
| Abstract Thinking | | | | | |
| Making A Sound Argument | | | | | |
| Leadership | | | | | |
| Independence/Initiative | | | | | |
| Problem Solving | | | | | |
| Articulating Ideas | | | | | |
| Providing Explanations | | | | | |
| Creativity/Imagination, Ability to Speculate | | | | | |
| Regular Class Work | | | | | |
| Learning Speed (Especially for Routine Topics) | | | | | |
| Memory for Details and Relationships | | | | | |
| Extended Concentration | | | | | |
| Sense of Humor | | | | | |
| Organization | | | | | |
| Asking Probing Questions | | | | | |
| Analyzing Complex Ideas | | | | | |
| Seeing Others' Perspectives | | | | | |
| Reflecting on Answers | | | | | |
| Flexibility (e.g. Thinking logically or divergently as appropriate to the situation) | | | | | |
| Aptitude for (name of subject) | | | | | |