



CONFIDENTIAL TEACHER RECOMMENDATION FORM (APPLYING TO GAN, MECHINAH & 1ST GRADE)

Parent: Please complete this top portion and submit to your child's current teacher with the return envelope.

Name of Child _____ Date of Birth _____

Current School _____ Grade Applying _____

I permit a representative of Barkai Yeshivah's Early Childhood Program to observe my child in his/her current school setting.

Parent Signature _____

Teacher: All information will be held in the strictest of confidence and used solely for admission purposes. **Please complete this form and email it to rmishan@barkaionline.org or place it in an envelope, sign the seal and mail directly to: Barkai Yeshivah Admissions, 5302 21st Avenue, Brooklyn, NY 11204.** Thank you for your time and effort, and the insight your comments will provide.

Speech & Language Skills

(Please address: articulation, listening, comprehending, expressive & receptive language)

Fine/Gross Motor Development

Cognitive Ability

(Concepts including: counting, letter recognition, problem solving, making inferences, ability to absorb new information, approach to new tasks)

Social/Emotional Development

(Please address: peer relationships, ability to transition, ability to regulate emotions, acceptance of boundaries and limits)

Please describe the child's particular strengths.

Please describe areas in need of further development.

Parent Participation/Support

Please circle the words that best describe this student:

- | | | | |
|-------------------|---------------------|---------------------|---------------------------|
| Anxious | Social | Manipulative | Perfectionist |
| Articulate | Creative | Insecure | Smart |
| Leader | Hyperactive | Energetic | Oppositional |
| Isolated | Disorganized | Confident | Irritable |
| Aggressive | Shy | Sensitive | Easily Discouraged |
| Happy | Independent | Distracting | Rambunctious |
| Moody | Well-Liked | Follower | Inattentive |

Additional Information (Please let us know anything else you feel we should know about this student)

Teacher _____ Telephone # _____

Class Hours _____ Class Size _____ Date _____