

Northfield Baptist Christian School
311 West Aurora Road
Northfield, Ohio 44067-2157
330-467-8918

Academic Recommendation

To the Applicant:

After completing the first three lines, this form is to be given to your current school principal or counselor. Please provide a stamped envelope addressed to: Northfield Baptist Christian School

Student's Name _____ Present Grade _____

Address _____
Street Address City State Zip

Name of Current School _____ District _____

To the Principal or Counselor,

The student named above has applied to Northfield Baptist Christian School and is requesting that you complete this recommendation form. We are interested in your estimation of the applicant's academic performance, intellectual promise and personal qualities. Feel free to allow a teacher to help complete this recommendation.

Your statements will become a part of our admissions files to be used by those involved in our decision process.

1. What is the student's achievement in relation to his//her ability? _____

2. The student's greatest strengths are: _____

3. The student's greatest weaknesses are: _____

Evaluator _____

Position _____