

# Recommendation

FOR THE ACADEMIC SCHOOL YEAR 2018–2019



Name of Applicant

Grade Applied For

The above named student is applying for admission to Florida College Academy. Florida College Academy strives to serve the above average student in a highly academic and spiritual environment.

This form is required as part of the student's application packet and will become part of their permanent record.

*I/We authorize Florida College Academy to contact schools and other sources to obtain information to support this application.*

*I/We will not seek access to confidential recommendation and evaluation materials before or after the admission decision is made.*

*I/We release every person and institution from any and all liability resulting from or pertaining to the furnishing of records, documents and other information to Florida College for purposes of an admission decision.*

Signature of Parent, Guardian or Other

Date

## Recommendation Form for Admission to Grades K–8th

Return this completed form, by mail or fax, to **Florida College Academy** (see below).

Please indicate your rating for each area by circling the appropriate description.

<b>Academics</b>	Exceptional	Excellent	Good	Marginal
<b>Integrity</b>	Exceptional	Excellent	Good	Marginal
<b>Conduct</b>	Exceptional	Excellent	Good	Marginal
<b>Initiative</b>	Exceptional	Excellent	Good	Marginal
<b>Emotional Development</b>	Exceptional	Excellent	Good	Marginal
<b>Care and Concern for Others</b>	Exceptional	Excellent	Good	Marginal
<b>Developmental Readiness</b>	Exceptional	Excellent	Good	Marginal
<b>Recommendation as a Student</b>	Exceptional	Excellent	Good	Marginal
<b>Recommendation as a Person</b>	Exceptional	Excellent	Good	Marginal
<b>Spirituality</b>	Exceptional	Excellent	Good	Marginal



**Additional Comments**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature

\_\_\_\_\_

Title

\_\_\_\_\_

Printed Name and Title

\_\_\_\_\_

Phone Number

\_\_\_\_\_

Street Address

Apt. Number

\_\_\_\_\_

City

State

Zip

Thank you for your time and effort in evaluating this student and assisting both the applicant and Florida College Academy. Please feel free to call if you have any questions or concerns. Your information will remain confidential.

Lynn Wade, *Principal*  
Florida College Academy  
813.899.6800  
wadelynn@floridacollege.edu