

NEW LIFE CHRISTIAN ACADEMY

2605 Southeast Blvd, Clinton, North Carolina 28328 (910)-592-3700 office.nlcanc@gmail.com nlcaclinton.com

Teacher Recommendation

To be completed by a current teacher and mailed directly to New Life Christian

Academy.

Name	Grade		
Name of School			
Address			
Teacher's Name			
•	tions to the best of your knowledge		
I. What is the student's attitude to	oward school?		
2. What is your candid estimation	of the student's moral character?		
3. Has the student ever been susp	ended/expelled? If yes, why?		
4. Does the student have any histo	ory of conduct/behavior problems?		
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5. Does the student have any learr	ning disability that would require special help		
to meet the needs in order to co	omplete the academic requirements?		
6. Do you have any additional com	iments?		
7.On a scale of 1 being "not likely" recommend this student?	and 10 being "strongly" how would you		

Check which applies to each description

	Execellent	Above Average	Average	Below Average	Poor
Overall Academics					
Adjusts well to change					
Participates in class					
Receives oral directions					
Follows multi- step instructions					
Works independently					
Uses time wisely					
Organized					
Shows self control					
Obedient/ Respectful					
Gets along with others					

Signature_____ Date ___/ ___/

Please mail to:

New Life Christian Academy 2605 Southeast Blvd, Clinton, North Carolina 28328