



Prospective Student Recommendation Form 2024-2025

Prospective Student's Full Name _____

The above-named student has requested your assistance in filling out a recommendation form for Jesuit Academy. The information that you provide is private and will not be shared with the student or his parents. In saying that, the person filling out this form MUST BE: A Former Teacher, Current Teacher and/or Administrator. Please email this form back to Admissions Department at: admissions@jesuitacademy.org.

Person Completing Form Name: _____

Relationship to Student: _____

Please rate the student using the scale provided. For responses of 2 or lower, please comment.	1= Poor 3= Average 5= Excellent	Comments
Attitude		
Acts Responsibly		
Attendance		
Works Well With Others		
Respectfulness		
Maturity		
Work Ethic/Effort		
Punctuality		
Leadership Potential		
Parental Involvement		

Overall impression of candidate: (please circle one)

Highly Recommend Recommend Recommend with Reservation Do Not Recommend

If you would like to provide any additional information pertaining to this student, please contact Admissions Department at: admissions@jesuitacademy.org or (402)-346-4464 ext. 23.

Signature _____ Date _____