



## **Teacher Recommendation** (Early Childhood)

Thank you for taking the time to complete this recommendation. All information is confidential and will be used only for admissions purposes. Once complete please mail or email the form directly to Karin Felix in our admissions office **karin.felix@hilleltorah.org**. Recommendation forms must be submitted directly by the school or teacher to ensure confidentiality.

Parents have given written permission in their application to Hillel Torah Day School for their child's current school to release information contained in their child's record to Hillel Torah Day School and for Hillel Torah staff to gather information about the student through class observations, conversations with school staff, and a review of his/her records.

Name of Student			Birth Date
Current School			Grade Applying For
Attendance:	Regular	☐ Not Regular	
Tardiness:	Infrequent	Frequent	

## **Social / Emotional Development**

Please check column that best describes the child.	Notably Advanced	Age Appropriate	Progressing Towards Age Appropriate	Possible Area of Concern
Comfort with peers				
Capacity to lead				
Capacity to follow				
Ability to work independently				
Cooperation in the classroom				
Initiates play				
Comfort with adults				
Uses materials appropriately				
Childs' self image				

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Early Readiness Development				
Please check column that best describes the child.	Notably Advanced	Age Appropriate	Progressing Towards Age Appropriate	Poss Are Con
Ability to listen in a large group				
Ability to listen in a small group				
Ability to complete a task in an allotted time				
Ability to contribute to discussions				
Ability to follow 1-step directions				
Ability to follow 2-step directions				
Respect for classroom routines				
Ability to transition between tasks				
Appreciation of new challenges				
Positive response to classroom expectations				
Ability to express thoughts and ideas				
Ability to problem solve				
Please comment on early readiness develor (receptive and expressive language, visua		criminations, etc.)		

## **Physical Development**

Please check column that best describes the child.	Notably Advanced	Age Appropriate	Progressing Towards Age Appropriate	Possible Area of Concern
Small muscle control and coordination				
Large muscle control and coordination				
Participation in outdoor physical activities				

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Fearful Perfectionist Disorganized Follower Rambunctious	☐ Anxious ☐ Motivated ☐ Shy ☐ Easily Discouraged ☐ Distracting	☐ Articulate ☐ Moody ☐ Influential ☐ Responsible ☐ Irritable	☐ Happy ☐ Manipulative ☐ Social ☐ Well-Liked ☐ Energetic	☐ Disobedien ☐ Aggressive ☐ Confident ☐ Distractable ☐ Leader
Please describe the	student's particular strength	S.		
Please describe area	as in need of further develop	ment. What strategies	are helpful for this chi	ild with respect to
	d competencies? Do you sug			iid with respect to
	any limitations, disabilities ove any resource support/ther			
	any limitations, disabilities o ve any resource support/ther			
Does the child receive	ve any resource support/then	rapies or have any bea	en recommended? Ple	ease explain.
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Does the child receive the chi	rtant part of our relationship cant's family.	rapies or have any bea	en recommended? Ple	ease explain.
Does the child receive Parents are an importance and ing this applications.	rtant part of our relationship cant's family.	rapies or have any bea	en recommended? Ple	ease explain.

phone: (847) 674-6533 x209 | fax: (847) 674-8313

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