



# Adelphi Academy

It is the supreme art of the teacher to awaken joy in creative expression and knowledge.

~Albert Einstein~

FORM D

TEACHER RECOMMENDATION FORM

\_\_\_\_\_ has applied for admission to Adelphi Academy.  
Name of Applicant

In order to make a fair evaluation of this student's probability for success in our Academy, the Office of Academy Admissions needs to have accurate knowledge regarding this student's past school performance. Please comment on this individual's intellect, academic achievement, classroom behavior, class participation, social interaction, emotional development and creativity. Please feel free to attach any other relevant information you wish.

All information will be held in strict confidence and will be used only for the purposes of Admissions. Thank you for your help.

(SCHOOL SEAL)

PLEASE AFFIX THE SEAL  
OF THE SCHOOL HERE TO  
MAKE THIS DOCUMENT OFFICIAL

Teacher's Name \_\_\_\_\_

Teacher's Signature \_\_\_\_\_ Date \_\_\_\_\_

In what context do you know the student? \_\_\_\_\_

Name of School \_\_\_\_\_