



EDUCATOR REFERENCE FORM ONE FORM COMPLETED PER STUDENT GRADES 1-8

Student applying for Nelson Christian Community School: _____

Your Name: _____
 Position: _____
 School (Name & Address): _____

EDUCATOR REFERENCE: Must be completed by a teacher who has taught your child within the last year.

The above student has applied at NCCS. It is our desire to develop a supportive relationship between home, school and church. **Please assist us by completing this form and returning it directly to the school by fax (250) 352-0546.** Families are not interviewed until this form is received. NCCS will keep the contents confidential. Thank you for taking the time to fill this form out. Your input is very valuable.

1. How long have you known the student? _____ In what relationship? _____
2. Was this student on an Individualized Education Program at your school? Yes No
3. Were there ever any modifications made to this student's academic program? Yes No
4. Has this student ever been recommended for psychological/educational testing or Special Ed. support? Yes No
5. Please carefully read each descriptor below and check the box that best describes this student:

	Consistently	Often	Occasionally	Seldom
Has positive work habits (completion, attitude, initiative)				
Follows directions from an adult.				
Shows respect for other students				
Makes careless mistakes in work or other activities.				
Has difficulty sustaining attention in tasks or play activities.				
Has difficulty organizing space, tasks or activities.				
Leaves the seat in classroom or in other situations, where expected to remain seated.				
Blurts out or interrupts				
Misses oral directions in class - needs additional cuing				
Is distracted easily or has trouble functioning if there is noise in the area.				
Is reluctant to join group activities.				
Has difficulty tolerating changes in routines, plans, and expectations.				
Is frustrated easily.				
Accepts correction from an adult				
Courteous and polite to adults and other students				
Honest and accepts responsibility and ownership for behavior				
Obedient to authority				
Demonstrates self-discipline				
Gets along well with other students				
Comments on any of the above areas:				

If we have questions regarding this student, would you be willing to have us contact you? Yes No

Phone #: _____ Email: _____

 Teacher Signature Position Date