## APPLICANT:

Please provide a pre-addressed (to PHCA), stamped most recent teacher from the last preschool your ch	-		n this f	orm. I	-orm	shou	ld be (	comple	eted b	y the		
I,, parent/guardian of								grant permission for				
the information requested below to be released to I								·				
Signature of Parent/Guardian	******	C *****	)ate ******	*****	*****	*****	*****	*****	*****	******		
Dear Teacher:			_									
Thank you for your assistance in completing this reference return this form as soon as possible so we ca		_		applica						·		
Please indicate how you would rate this student:												
Able to Verbally Communicate Needs —————	<i>Poc</i> 1	o <i>r</i> 2	<i>Belo</i> 3	w Ave. 4	<i>A</i> 5	<i>ve.</i> 6	G0 7	<i>00d</i> 8	<i>Exc</i> 9	<i>cellent</i> 10		
Able to Follow Directions————————————————————————————————————		2	3	4	5	6	7	8	9	10		
Pays Attention during Circle Time or Instructions——	1	2	3	4	5	6	7	8	9	10		
Able to Work Independently————————————————————————————————————	1	2	3	4	5	6	7	8	9	10		
Participates in Group Activities———————————————————————————————————	1	2	3	4	5	6	7	8	9	10		
Able to Relate to and Play Well with Peers————	1	2	3	4	5	6	7	8	9	10		
Appropriate Classroom Behavior—————	1	2	3	4	5	6	7	8	9	10		
Exhibits Self-Control	1	2	3	4	5	6	7	8	9	10		
Polite and Uses Proper Manners ————————————————————————————————————	1	2	3	4	5	6	7	8	9	10		
Knows and Recognizes First Name—————	<del></del> 1	2	3	4	5	6	7	8	9	10		
Holds Crayon or Pencil Properly——————	1	2	3	4	5	6	7	8	9	10		
Goes to and Uses Bathroom Independently————	<del></del> 1	2	3	4	5	6	7	8	9	10		
Attitude and Respect towards Adults—————	1	2	3	4	5	6	7	8	9	10		
Cooperation and Involvement of Parents————	1	2	3	4	5	6	7	8	9	10		
Any areas that need improvement:												
Student's areas of strength:												
Teacher's Signature:	Print Name:											
School/Grade:	Phone Number:											