



# Pearl Harbor Christian Academy

94-1044 WAIPIO UKA STREET, WAIPAHU, HAWAII, 96797 (808) 678-3997, (808) 678-6607

## TEACHER REFERENCE FORM (PreK & JrK)

### APPLICANT:

Please provide a pre-addressed (to PHCA), stamped envelope with this form. Form should be completed by the most recent teacher from the last preschool your child attended.

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_ grant permission for the information requested below to be released to Pearl Harbor Christian Academy.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\*\*\*\*\*

Dear Teacher:

Thank you for your assistance in completing this reference regarding: \_\_\_\_\_.

Please return this form as soon as possible so we can process his or her application.

*Please indicate how you would rate this student:*

	<i>Poor</i>		<i>Below Ave.</i>		<i>Ave.</i>		<i>Good</i>		<i>Excellent</i>	
Able to Verbally Communicate Needs _____	1	2	3	4	5	6	7	8	9	10
Able to Follow Directions _____	1	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 _____	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 _____	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: \_\_\_\_\_

***Please return this form directly to Pearl Harbor Christian Academy with the pre-stamped envelope provided by the applicant or fax directly to PHCA at the number listed above.***