

Confidential Recommendation Form

(To be completed in ink by a teacher, guidance counselor or school official)

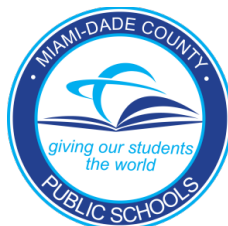
 Student's Name (Please print) Current Grade

 Current School Name of Person Completing Recommendation Form

How long have you known this student and in what context?

	Superior	Outstanding	Above Average	Average	Needs Improvement
Maturity					
Scholarship					
Ability to Work with Others					
Motivation					
Responsibility					
Dependability/ Reliability					
Character/Integrity					
Leadership					

Please provide comments about the student's potential for success at Young Men's Preparatory Academy Choice Program:



Based on your responses to the indicators on the previous page, please make your recommendation below.

<p>_____ I RECOMMEND this student for admission to the Young Men's Preparatory Academy Magnet.</p> <p>_____ I DO NOT RECOMMEND this student for admission to the Young Men's Preparatory Academy Magnet.</p> <p>Comment:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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Signature

Date

Title

Please return this form to:

Young Men's Preparatory Academy
3001 N.W. 2nd Avenue
Miami, Florida 33127
Phone: 305-571-1111
Fax: 305-571-1112

Deadline: January 15, 2013

<p>FOR OFFICE USE ONLY</p> <p>RECEIVED : _____</p>
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