

**First United Methodist School
Student Reference Information
Grades 1 - 5**

Name of Student _____ Current Grade _____

How long have you known the student _____ Relationship to Student _____

Based on your personal experience and knowledge of the student, please provide your assessment of his/her strengths and inclinations.

Circle the appropriate response.

	Below Average	Average	Above Average	Outstanding
Academic Potential	1	2	3	4
Academic Achievement	1	2	3	4
Initiative/Motivation	1	2	3	4
Self-Discipline	1	2	3	4
Personal Integrity	1	2	3	4
Conduct & Discipline	1	2	3	4
Respectfulness	1	2	3	4
Concern for Others	1	2	3	4
Dependability	1	2	3	4

On reverse side of form write a brief paragraph describing student's strengths and inclinations; include any unique challenges in ministering to this student.

Your name: _____

School Name: _____

School Address: _____

Signature: _____

Please mail form directly to:
First United Methodist School
122 W. Sproule Ave.
Kissimmee, FL 34741
407-847-8805

Permission is given to release the above information.

Parent's Signature: _____

Parent Name (Print) _____

Date: _____