



APPLICATION FOR ADMISSION

850 Greenhills Drive Ann Arbor, MI 48105

www.greenhillsschool.org

P: (734) 769-4010 | F: (734) 205-4056

APPLICATION CHECKLIST

FOR ALL APPLICANTS

- \$50.00 Application Fee – payable to Greenhills School
- Visit: Schedule a visit to Greenhills to attend classes for a day (call Eric Gajar)
- Form I: Personal Information
- Form II: Parent Questionnaire
- Form III: Principal or Counselor Recommendation (If your Principal will not complete this form, please submit Form IV instead)
- Form IV: Personal Recommendation (ONLY if you cannot get a Principal or Counselor Recommendation)
- Form V: Authorization for Release of School Records — submit this form to your CURRENT school, not to Greenhills

FOR APPLICANTS TO THE MIDDLE SCHOOL (6TH – 8TH GRADE)

- Form VI: Portfolio and Student Writing Sample
- Form VII: Math or Science Teacher Recommendation (For 6th Grade: from 5th grade teacher)
- Form VIII: English or History Teacher Recommendation (For 6th Grade: from 4th grade teacher)

FOR APPLICANTS TO THE UPPER SCHOOL (9TH – 12TH GRADE)

- Form IX: Graded Writing Sample and Essay Questions
- Form X: Math or Science Teacher Recommendation
- Form XI: English or History Teacher Recommendation
- SSAT or PSAT, ACT or SAT Test Scores

PLEASE NOTE:

For all teacher recommendations, please give the teacher a stamped envelope addressed to:
Greenhills School Admission Office
850 Greenhills Drive
Ann Arbor, MI 48105

FORM I PERSONAL INFORMATION

\$50.00 Application Fee

Applying for grade _____

Applicant's Name _____

Please print

Last/Family

First

Nickname

Male Female

Date of birth ____ / ____ / ____

Place of birth _____

City/State/Country

Citizenship U.S. Other (Please Specify) _____

International Students: Do you require an I-20 form to obtain a student visa? Yes No

Father's/Stepfather's/Guardian's Full Name:

Name _____

Last

First

Middle

Home Address _____

Street # and Name

City

State

Zip Code

Telephone Number _____ E-mail _____

Employer/Position _____

Business Address _____

Street # and Name

City

State

Zip Code

Business Telephone Number _____ Fax _____

E-mail _____

Education (colleges/degrees/dates): _____

Mother's/Stepmother's/Guardian's Full Name

Name _____

Last

First

Middle

Home Address _____

Street # and Name

City

State

Zip Code

Telephone Number _____ E-mail _____

Employer/Position _____

Business Address _____

Street # and Name

City

State

Zip Code

Business Telephone Number _____ Fax _____

E-mail _____

Education (colleges/degrees/dates): _____

Please address correspondence regarding this applicant to:

- Both Parents
- Father
- Mother
- Other

The student lives with: (check all that apply)

- Father
- Mother
- Stepfather
- Stepmother
- Guardian

Please check all that apply:

- Parents Married
- Parents Separated
- Parents Divorced
- Never Married
- Father deceased/date _____
- Mother deceased/date _____

Candidate's previous school(s)

Grades attended

Brothers and sisters Name

Age

School

Current Grade

List any relative or friend of the candidate presently or previously associated with Greenhills School.

Name Relationship

Name Relationship

Greenhills School admits qualified students and does not discriminate on the basis of race, color, gender, sexual orientation, physical or other disabilities, national or ethnic origin in administration of its educational policies, admission policies, financial aid and athletic or other school-administered programs; and grants to all the rights, privileges, programs and activities generally accorded or made available to students at the school

FORM II PARENT STATEMENT

Dear Parent(s) or Guardian(s),

We are pleased your child is applying to Greenhills School. Greenhills is a selective school for students who are interested in studying with bright and motivated peers and learning from a lively and engaged faculty. Greenhills students are inquisitive, passionate, curious, and involved in all aspects of our community, and all graduates continue their education at a college or university.

At Greenhills we view ourselves as partners in the education of your sons and daughters, and as the first step in this partnership we hope you will give the Admission Committee the benefit of your insights about your child by answering the following questions.

Applicant's Name _____
Please print Last/Family First Candidate for Grade

1. What qualities of mind and character in your daughter or son most delight you?
2. How do you teach your child something? Please describe an instance.
3. What do you believe your son or daughter will contribute to the Greenhills community?
4. What do you consider to be the most important qualities in a school to which you send your child?
5. What are your expectations of Greenhills?
6. Has anyone other than you had a substantial role in raising your child?
7. Is there any additional information about your child that you feel is important and will help us better understand their educational needs (e.g. personal, social, cultural, religious, or medical)? Please share these ideas here or on an additional page. You may also attach any supporting information you believe is relevant.

The following two questions are optional. They will be helpful to us if your child is enrolled.

Describe past or present health issues (hospitalization, accidents, traumas, allergies, eating issues, etc.).

Was your child adopted? If so, at what age?

Please print parent name(s)

Parent signature

Date

Parent signature

Date

FORM III PRINCIPAL/COUNSELOR REFERENCE

Applicant's Name _____
Please print Last First Nickname

The above named student is a candidate for admission to Greenhills School. Your insight and comments will help us give the candidate fair and thoughtful consideration for admission. Your evaluation represents your knowledge of the student, and is valued. Please be assured that the information you provide will be kept in strict confidence.

Has the student ever been dismissed, suspended, placed on probation, or received other serious disciplinary sanction? Yes No

Has he or she withdrawn from school voluntarily for an extended period of time for reasons other than health? Yes No

If the answer to either or both of these questions is "yes," please provide a full explanation on a separate piece of paper.

This form is meant to facilitate your writing a reference. You may prefer to attach a prepared recommendation or a photocopy of a common reference form.

Thank you for your assistance.

THE FOLLOWING IS THE CONSENSUS OF OPINION ON THE CANDIDATE

	Below Average	Average	Above Average	Good	Excellent	Exceptional
Academic potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independence as a learner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Citizenship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extracurricular involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name _____ Position _____

Signature _____ Date _____

FORM IV PERSONAL RECOMMENDATION

To the Student: This recommendation should be given to an adult who is not related to you, but who knows you well. You may choose anyone who interacts with you on a regular basis and who knows you through one of your interests: An employer, a music teacher, a coach, a neighbor, or a member of the clergy. Before giving this form to your recommender, please write your name and school below.

Name of Applicant _____
Last First

Name of Current School _____

Please give your recommender a stamped envelope addressed to the Greenhills Admission Office, 850 Greenhills Dr., Ann Arbor, MI 48105 or ask them to fax the recommendation to (734) 205-4056.

To the Recommender: The student named is a candidate for admission to Greenhills School. The Admission Committee places considerable weight on the personal qualities of each applicant. Your recommendation is vital to our process, and we would appreciate your most candid and thoughtful responses. We assure you that your comments will be used confidentially in the admission process and will not be kept as part of the student's permanent record.

1. In what context and for how long have you known the applicant?
2. What are the first words that come to mind to describe the applicant?
3. What do you feel is the applicant's greatest strength?
4. Where do you see the most room for growth in this applicant?
5. Please comment on the applicant's performance in and commitment to extracurricular, community, and/or work involvements.
6. What do you feel will be the applicant's contributions to a small school community? Please include in your response reflections on the applicant's personal integrity, concern for others, dependability, respect accorded by peers, and respect accorded by adults.
7. Please add any additional information that will give us a complete picture of this candidate.

I recommend this student for admission to Greenhills: Enthusiastically Strongly Mildly With reservation Not at all

Recommender Name _____
Last First

Relationship to Applicant _____

Mailing Address _____
Street # and Name City State Zip Code

Telephone Number _____ E-mail _____

Signature _____ Date _____

Greenhills School admits qualified students and does not discriminate on the basis of race, color, gender, sexual orientation, physical or other disabilities, national or ethnic origin in administration of its educational policies, admission policies, financial aid and athletic or other school-administered programs; and grants to all the rights, privileges, programs and activities generally accorded or made available to students at the school

FORM V AUTHORIZATION FOR RELEASE OF SCHOOL RECORDS/TRANSCRIPTS

DUE DATE: January 30

TO THE PARENT

Please complete, sign, and take this form to your child's Current School.

To facilitate the admission process to Greenhills School I, _____
(Please PRINT name of parent or guardian)

the parent/guardian of _____, authorize the teachers and
(Please print name of student)

administrators of _____ to send the following:
(Please print name of school)

1. Transcript of academic record for the past two years
2. Progress report of current courses if not included on the transcript
3. Results of achievement or aptitude tests
4. Teacher comments (if available)
5. Copies of personal evaluations or reports

Signature of parent of guardian _____ Date _____

The above listed information should be sent to: Greenhills School, Office of Admission, 850 Greenhills Drive, Ann Arbor, Michigan 48105

FORM VI PORTFOLIO/STUDENT WRITING SAMPLE

MIDDLE SCHOOL APPLICANTS

Applicant's Name _____

The Admission Committee wants to know as much as possible about each applicant, and this is your chance to share something special about yourself by submitting three examples of your work.

1. Submit a short story, poem, drawing, photograph or other work. Feel free to submit your work using this sheet and additional sheets as necessary, or you may submit your work on a 3.5" disk, audio tape/videotape, e-mail, URL or any other medium.

In addition to the above, please do the following work in your own handwriting, without any assistance.

2. CREATIVE DESIGN (Please choose one of the following.)

Option #1 - Science and Technology

Rube Goldberg was a Pulitzer Prize winning cartoonist, sculptor and author, who was famous for drawing absurdly connected machines that functioned in extremely complex and roundabout ways in order to produce a simple end result. A "Rube Goldberg Machine" would integrate a series of simple machines (levers, pulleys, inclined planes, etc.) that, once triggered, would set into motion a chain reaction that eventually completed a task. For example, a machine designed to light a candle might look like this.



*Candle Lighter***

** (Barrel falls onto lever, sending cow flying into the air, forcing the giant sparkler down, lighting the candle.)

Your Challenge:

Design (and label) a "Rube Goldberg Machine" that could be used to "wake a person up in the morning." Create and label your machine making sure that you include a minimum of five components or steps. Source: <http://www.rube-goldberg.com/>

Option #2 - Social Studies

Draw a map of your own "island nation" complete with the names of your island, surrounding oceans, rivers, mountains, cities, beaches, airports, resorts, forests, etc. Please color the map and include as many details as possible.

3. WRITING (Please choose one of the following.)

Option #1 - Math

Imagine that you've been magically transported to the "Kingdom of Mathematica," where everything (towns, citizens, animals, etc.) is associated with or named after mathematical concepts or terms. Describe in writing your journey and the sites, people and adventures you encounter along the way.

Option #2 - Language Arts

Describe a major character from a favorite book you've read. Be as detailed as possible in order to re-create that character through your writing.

FORM VII MATH/SCIENCE TEACHER RECOMMENDATION

MIDDLE SCHOOL APPLICANTS (OR YOUR 5TH GRADE TEACHER)

To the Student: Please give this form to a current teacher of Math or Science with a stamped envelope addressed to: Greenhills School Admission Office, 850 Greenhills Dr., Ann Arbor, MI 48105 or ask them to fax the recommendation to (734) 205-4056. Sixth grade applicants please give this form to a 4th grade teacher.

Name of Applicant _____
Last First

Name of Current School _____

To the Recommender: The student whose name appears above is an applicant for admission to Greenhills School. In order to carefully consider this student we want to learn about the candidate's character, academic ability, strengths, and weaknesses from those persons best qualified to make an evaluation. We assure you that your comments will be used confidentially in the admission process and will not be kept as part of the student's permanent record. We thank you very much for your significant help and cooperation in our consideration of this candidate.

Work Habits

- Well-organized & efficient
- Usually prepared
- Needs some prodding
- Disorganized & careless

Computational Skills

- Accurate & advanced
- Competent ability
- Generally adequate
- Lacks basic skills

Emotional Stability

- Extremely stable
- Usually stable
- Moody
- Unstable

Achievement in Studies

- High quality work at all times
- Surpasses expectations
- Consistent with ability
- Limited to special interests
- Generally less than peers

Demeanor

- Outgoing & eager
- Friendly but quiet, modest
- Somewhat shy
- Withdrawn

Leadership

- Positive way
- Negative way
- More than just a follower
- Average
- A follower

Intellectual Curiosity

- Keen in many areas
- Lively in one or two areas
- Generally thoughtful
- Sporadic
- No sustained intellectual interest

Integrity

- Always reliable & trustworthy
- Normally dependable
- Needs occasional watching
- Unreliable

Associations

- With the most positive class members
- Wholesome but not outstanding
- Well-behaved non-participant
- With troublesome students

Please comment about the applicant regarding the areas below:

Reasoning and problem solving abilities _____

Sense of humor _____

Creativity _____

Sensitivity _____

Recommender Name

Name _____ Title _____

Last

First

School Name _____

Mailing Address _____

Street # and Name

City

State

Zip Code

Telephone Number _____ E-mail _____

Signature _____ Date _____

Comments _____

FORM VIII ENGLISH/HISTORY TEACHER RECOMMENDATION

MIDDLE SCHOOL APPLICANTS (OR YOUR 5TH GRADE TEACHER)

To the Student: Please give this form to a current teacher of English or History with a stamped envelope addressed to: Greenhills School Admission Office, 850 Greenhills Dr., Ann Arbor, MI 48105 or ask them to fax the recommendation to (734) 205-4056. Sixth grade applicants please give this form to a 4th grade teacher.

Name of Applicant _____
Last First

Name of Current School _____

To the Recommender: The student whose name appears above is an applicant for admission to Greenhills School. In order to carefully consider this student we want to learn about the candidate's character, academic ability, strengths, and weaknesses from those persons best qualified to make an evaluation. We assure you that your comments will be used confidentially in the admission process and will not be kept as part of the student's permanent record. We thank you very much for your significant help and cooperation in our consideration of this candidate.

Work Habits

- Well-organized & efficient
- Usually prepared
- Needs some prodding
- Disorganized & careless

Emotional Stability

- Extremely stable
- Usually stable
- Moody
- Unstable

Achievement in Studies

- High quality work at all times
- Surpasses expectations
- Consistent with ability
- Limited to special interests
- Generally less than peers

Demeanor

- Outgoing & eager
- Friendly but quiet, modest
- Somewhat shy
- Withdrawn

Leadership

- Positive way
- Negative way
- More than just a follower
- Average
- A follower

Intellectual Curiosity

- Keen in many areas
- Lively in one or two areas
- Generally thoughtful
- Sporadic
- No sustained intellectual interest

Integrity

- Always reliable & trustworthy
- Normally dependable
- Needs occasional watching
- Unreliable

Associations

- With the most positive class members
- Wholesome but not outstanding
- Well-behaved non-participant
- With troublesome students

Please comment about the applicant regarding the areas below:

Reasoning and problem solving abilities _____

Sense of humor _____

Creativity _____

Sensitivity _____

Recommender Name

Name _____ Title _____
Last First

School Name _____

Mailing Address _____
Street # and Name City State Zip Code

Telephone Number _____ E-mail _____

Signature _____ Date _____

Comments _____

FORM IX APPLICANT GRADED WRITING SAMPLE/ESSAYS

UPPER SCHOOL

Name _____
Last/Family First Middle Initial

Nickname or preferred name _____ Student e-mail address _____

Graded Writing Sample:

Please enclose a copy of a graded writing sample (an English or History paper) which you submitted during the school year. The copy should include your teacher's comments and suggestions.

Please make sure to add:

- Title of paper
- Course for which paper was assigned
- Date paper was submitted
- Describe the assignment on which the paper was based

ESSAY:

In 500 words or less, please tell us ONE thing you want to make sure we know about you that we wouldn't learn from other parts of your application, and why you feel this is important.

Complete the following unfinished sentences:

My greatest strength is _____

A weakness I have is _____

I get angry when _____

I am always happy when _____

I would describe myself as _____

In my opinion school is _____

People I like best are _____

People who bother me usually _____

Something that is important to me is _____

The reason I want to attend Greenhills is _____

Candidate's Signature _____ Date _____

Parent's Signature (or Guardian's) _____ Date _____

FORM X CURRENT MATH OR SCIENCE TEACHER RECOMMENDATION

Greenhills is a selective school for students who are interested in studying with bright and motivated colleagues and learning from a lively and engaged faculty. Greenhills students are highly motivated and involved in all aspects of our community, and all graduates continue their education at a college or university.

To the Applicant: Please provide the information requested in this box and submit this form with a stamped, addressed envelope to your current Math or Science teacher to complete and send directly to Greenhills School Admission Office, 850 Greenhills Drive, Ann Arbor, MI 48105.

Applicant's Name _____
(please print) Last/Family First/Called Candidate for Grade

Name of Math/Science Teacher _____
(please print) School

Please note: the information here is confidential and is to be used only by admission officers at Greenhills School. Please sign below to acknowledge that you will not have access to this confidential information and that you understand it will not become part of your applicant's permanent record.

Signature of Student _____

Signature of Parent/Guardian _____

To the Math/Science Teacher: The above named student is a candidate for admission to Greenhills School. Your insight and comments will help us give the candidate fair and thoughtful consideration for admission. Your evaluation represents your knowledge of the student, and is valued. Please be assured that the information you provide will be kept in strict confidence.

This form is meant to facilitate your writing a reference. You may prefer to attach a prepared recommendation or a photocopy of a common reference form. Thank you for your assistance.

Teacher of _____
Name of Course

Section level: HONORS, REGULAR, OTHER _____

Number of students in this class _____

What adjectives or phrases first come to mind in describing the student? (Please note both strengths and weaknesses.)

Briefly describe your course. It is especially helpful to know what texts are used and if the students are grouped by ability.

Is this course part of a tracking system or designated as an honors or accelerated course? Yes No

Student's Mathematical Background: The courses listed below suggest a sequence typical of the mathematics curriculum in many American secondary schools. **Please check those courses or list others which the student will have completed by the end of the current school year.**

- Basic First Year Algebra (*does not include extensive study of rational expressions, irrational numbers, and quadratic equations*)
- First Year Algebra (*a thorough course which included quadratics*)
- Geometry
- Second Year Algebra (*not including trigonometry*)
- Second Year Algebra (*includes numerical trigonometry through the laws of sine and cosine*)
- Pre-Calculus (*an introduction*)
- Calculus (*an introduction*)
- Calculus (*Advanced placement AB*)
- Calculus (*Advanced placement BC*)

OVERALL EVALUATION OF THE STUDENT

I. When you compare the candidate to other students you are now teaching in this class, how would you rank the candidate?

	Below Average	Average	Above Average	Good	Excellent	Exceptional
a. Math computation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Math concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Overall performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

II. IN COMPARISON WITH OTHER STUDENTS I HAVE KNOWN, I RATE THE CANDIDATE

	Poorer Than Most	The Same As Most	Better Than Most	Among the Very Best	Truly Exceptional
a. Academically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Non-academically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Overall rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

III. CAPACITY AS A STUDENT

	Poor	Fair	Good	Excellent	Exceptional
a. Intellectual curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IV. CHARACTER AND PERSONALITY

	Poor	Fair	Good	Excellent	Exceptional
a. Initiative and drive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Peer interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Maturity in relation to peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Response to criticism and evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

V. SPECIAL INTERESTS/APTITUDES

	Not Active	Active	Very Active	Cannot Comment
a. Arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Athletics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Community involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Publications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Student government	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name (Print) _____

I taught the applicant in: _____ grade.

School _____

Address _____

School tel. no. _____ Ext. _____

School email _____

Signature _____ Date _____

Thank you for your assistance

FORM XI CURRENT ENGLISH OR HISTORY TEACHER RECOMMENDATION

Greenhills is a selective school for students who are interested in studying with bright and motivated colleagues and learning from a lively and engaged faculty. Greenhills students are highly motivated and involved in all aspects of our community, and all graduates continue their education at a college or university.

To the Applicant: Please provide the information requested in this box and submit this form with a stamped, addressed envelope to your current English or History teacher to complete and send directly to Greenhills School Admission Office, 850 Greenhills Drive, Ann Arbor, MI 48105

Applicant's Name _____
(please print) Last/Family First/Called Candidate for Grade

Name of English/History Teacher _____
(please print) School

Please note: the information here is confidential and is to be used only by admission officers at Greenhills School. Please sign below to acknowledge that you will not have access to this confidential information and that you understand it will not become part of your applicant's permanent record.

Signature of Student _____

Signature of Parent/Guardian _____

To the English/History Teacher: The above named student is a candidate for admission to Greenhills School. Your insight and comments will help us give the candidate fair and thoughtful consideration for admission. Your evaluation represents your knowledge of the student, and is valued. Please be assured that the information you provide will be kept in strict confidence.

This form is meant to facilitate your writing a reference. You may prefer to attach a prepared recommendation or a photocopy of a common reference form. Thank you for your assistance.

Teacher of _____
Name of Course

Section level: HONORS, REGULAR, OTHER _____

Number of students in this class _____

What adjectives or phrases first come to mind in describing the student? (Please note both strengths and weaknesses.)

Briefly describe your course. It is especially helpful to know what texts are used and if the students are grouped by ability.

Is this course part of a tracking system or designated as an honors or accelerated course? Yes No

OVERALL EVALUATION OF THE STUDENT

I. When you compare the candidate to other students you are now teaching in this class, how would you rank the candidate?

	Below Average	Average	Above Average	Good	Excellent	Exceptional
a. Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Overall performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

II. IN COMPARISON WITH OTHER STUDENTS I HAVE KNOWN, I RATE THE CANDIDATE

	Poorer Than Most	The Same As Most	Better Than Most	Among the Very Best	Truly Exceptional
a. Academically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Non-academically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Overall rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

III. CAPACITY AS A STUDENT

	Poor	Fair	Good	Excellent	Exceptional
a. Intellectual curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IV. CHARACTER AND PERSONALITY

	Poor	Fair	Good	Excellent	Exceptional
a. Initiative and drive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Peer interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Maturity in relation to peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Response to criticism and evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

V. SPECIAL INTERESTS/APTITUDES

	Not Active	Active	Very Active	Cannot Comment
a. Arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Athletics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Community involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Publications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Student government	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name (Print) _____

I taught the applicant in: _____ grade.

School _____

Address _____

School tel. no. _____ Ext. _____

School email _____

Signature _____ Date _____

Thank you for your assistance