

Please complete Part I of this form. Then ask the current teacher in the academic area being considered to complete Part II and return it directly to Queen's Grant HS.

Mail to: QGHS Admissions 10323 Idlewild Rd, Matthews NC 28105, or Fax to: 704-545-0738

Part I. To be completed by s	tudent				
Student's Name:	Current School:				
Honors courses for which the	student wants	to be considere	ed:		
Honors English Honors History Honors Science Honors Math					
Part II. To be completed by t	eacher				
The above student is interested in taking honors courses at Queen's Grant High School. Please evaluate their readiness for this level of work.					
a) I am completing the reco	ommendation ba	ased on the stu	dent's performa	ance in the follo	wing course?
(choose one):					
Language Arts/English Teacher (Grade level:)					
Science Teacher (Course name:)					
Social Science Teacher (Course name:)					
Math Teacher (Course name:)					
b) Student's current grade in your class:					
Evaluation:					
Category	Top 5%	Above	Average	Below	No basis for
		Average		Average	Judgment
Academic Achievement					
Intellectual Promise					
Creative, Original Thought					
Productive Class Discussion					
Motivation/ Self-Discipline					
Maturity					
Quality of Writing					
Self Confidence					
Ability to work with others					
Leadership					
Integrity					
Respect for Classmates					
Respect for Faculty					
Overall					
Comments:					
Please Check One:	_ Recommend	Do Not Recommend			
Teacher Signature:			1	Date:	
Teacher Name (Print):			Email:		